

Order Form



102 Performance Drive
Portland, IN 47371
Phone 260-726-6689
Fax 260-726-4159

BILLING ADDRESS

Name _____
Address _____
City, State, Zip _____
Phone No. _____

Cashier's Check/Money Order enclosed (payable to Moser Engineering)

Credit Card Number _____ Exp. Date _____

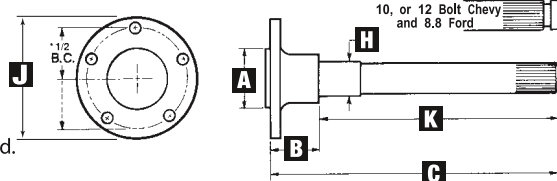
SHIPPING ADDRESS (if different than billing address)

Name _____
Address _____
City, State, Zip _____
Phone No. _____

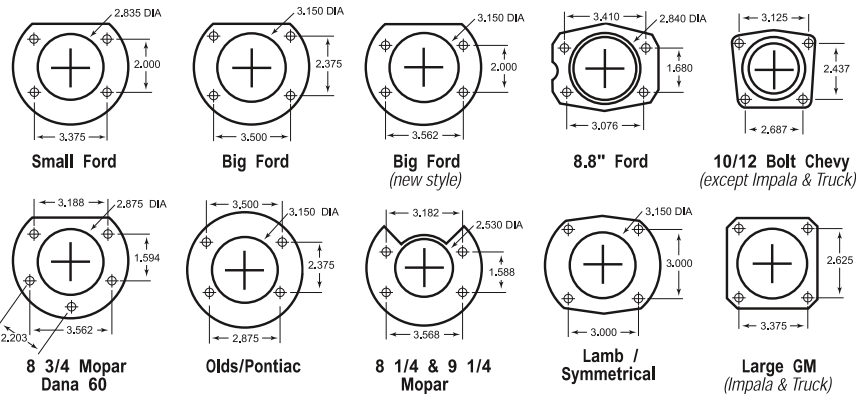
MEASURING FOR INDIVIDUAL AXLE LENGTH

Required Information

- "C" dimension.
- "A" dimension.
- The type of rear end.
- Spline count.
- The type of housing end being used.
- The type of brakes being used.
- Bolt pattern.



If you are ordering axles and you do not have a housing to measure, we need the required information. If this information is not provided your order cannot be processed.



Type of Rear End _____
(9" Ford, 12 Bolt Chevy, etc.)

You must choose one of the housing ends below left.

Driver Side Dimensions:
C _____
K _____

Passenger Side Dimensions:
C _____
K _____
A _____

Bolt Circle & Stud Type: _____
 Screw In Press In Size or Part# _____
 If using disc brakes, list axle flange diameter needed

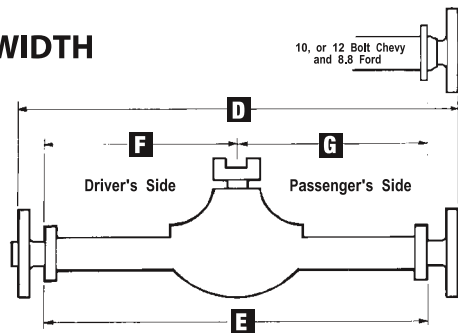
J _____
B _____
H _____

Spline Count _____
 (If spool list manufacturer)

MEASURING FOR REAR END WIDTH

Required Information

- "F" and "G" dimensions.
- or "E" dimension and your pinion offset.
- or "D" dimension and your pinion offset.
- "A" dimension.
- The type of rear end.
- Spline count.
- The type of housing end being used.
- The type of brakes being used.



If you are ordering axles and you do not have a axles to measure, we need the required information. If this information is not provided your order cannot be processed.

D Axle flange to axle flange width
E Housing flange to housing flange
F Driver side housing flange to pinion center
G Passenger side housing flange to pinion center

D _____
E _____
F _____
G _____

Type of Rear End _____
(9" Ford, 12 Bolt Chevy etc.)

Type of Housing End _____
(9" Ford, 12 Bolt Chevy etc.)

You must choose one of the housing ends above left.

ITEMS YOU ARE ORDERING

Item No.	Quantity	Page No.	Product Name	Description



Custom Order Release

Please be advised that in placing this order for custom manufactured merchandise you are accepting full responsibility for the correctness and accuracy of all pertinent ordering information. Further, be advised that by filling out and signing this form you are affirming the correctness and accuracy of the information contained herein and authorizing Motor State Distributing to order this custom merchandise. Once this form has been signed, the purchaser assumes full responsibility for paying for the custom merchandise and no refund will be issued unless it can be shown that any errors or defects were the fault of the manufacturer and not caused by erroneous information.

As a rule, custom orders cannot be cancelled once the order is placed with the manufacturer. All custom orders are subject to freight and handling charges from the manufacturer.

No returns will be accepted on custom-built items.

Sales Contact At Motor State _____

Customer Number _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Fax _____

Email _____

Print Your Name _____ Date _____

Authorized Signature _____

If you are submitting this form electronically, your digital signature must be added last. Once signed, this form becomes non-editable. Please double check all items first.

Motor State Distributing

8300 Lane Drive, Watervliet MI 49098

web: www.motorstate.com | phone: 1-800-772-2678 | fax: 1-800-772-2618