



Radio/Cluster Exchange or Repair Form

Dealership _____ Repair Facility _____ Walk in _____

Dealer Name _____ Dealer Code _____

Customer Name _____

Address _____

City _____ State _____ Zip Code _____

Contact: _____ Phone # _____

Part# _____ Radio _____ Cluster _____

Concern with Unit _____

Goodwill Y N If Yes authorized by _____

Recheck Y N If Yes Previous RO# _____

How Part # was obtained Tech2 _____ Visual _____ Catalog _____

V.I.N. _____ Odometer Type Miles _____ Kilometers _____

Mileage _____ Engine Hours _____

Engine Hours _____ Set Mileage/Hours Y/ N _____

Techni-Car to set mileage and hours Y N

Repair/Same Unit return due to programming _____

If the microprocessor needs to be replaced on a unit brought in for repair,
Programming will be required.

Payment Method: Cash _____ Credit Card _____ Check _____ Acct _____

Tax Exempt Yes _____ No _____

450 Commerce Blvd Oldsmar, Fl 34677 Tel (813) 855-0022 (800) 886-0022 FAX (813)
855-2101