

2 Door Pick Up Cut Sheet

Customer # _____ Date _____

Order # _____

Part _____

Name (Print) _____

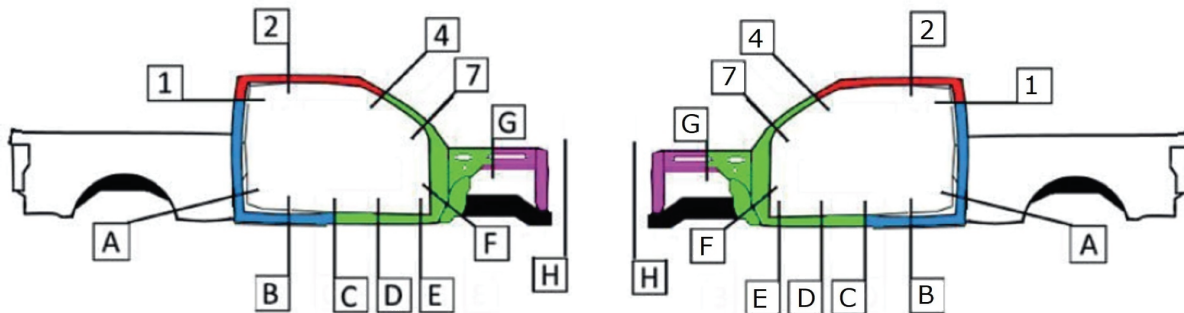
Signature _____

For LKQ Internal Use Only

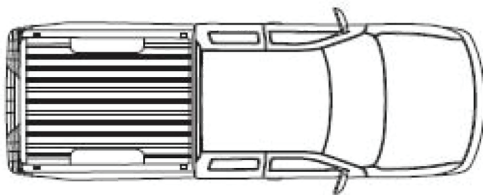
Cut Code _____

Sales Rep _____

All cuts require a signed cut sheet prior to being processed.
Once received by customer cuts are not returnable or refundable.

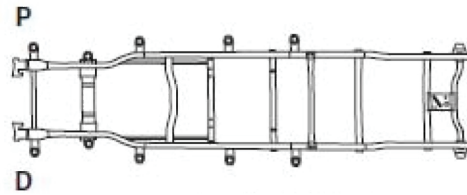


TOP VIEW



Please use the area below to add detailed cut instructions:

UNDERBODY VIEW



Please use the area below to add detailed cut instructions:

LKQ

Keeping you moving