

Coupe Cut Sheet

Customer # _____ Date _____

Order # _____

Part _____

Name (Print) _____

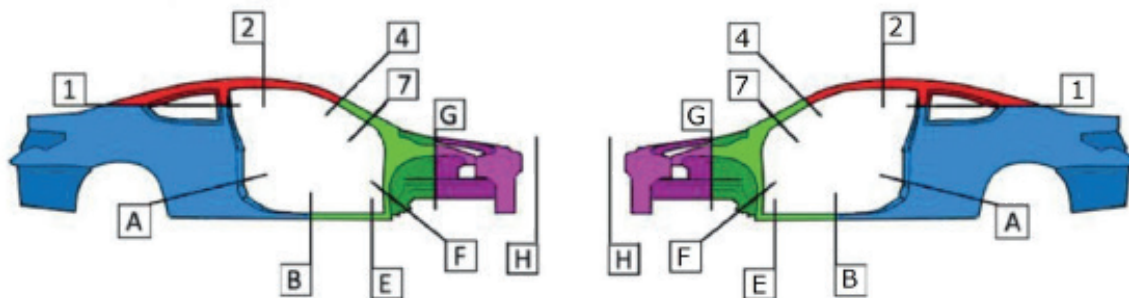
Signature _____

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: