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CUSTOMER NAME AND ADDRESS **DEALER NAME** (Only Required for Dealers) Full Name Full Address PO# (Please Check One Below) Phone: Ship to Dealer Shop E-mail: Drop Ship to Customer Year (specify half year models): Make of Vehicle: Engine Model: Mileage on Engine: Mileage on Injectors: Reason For Sending Injectors? Any Known Issues With Injectors? If yes, please explain. Are the Injectors Modified? If yes, please explain.