

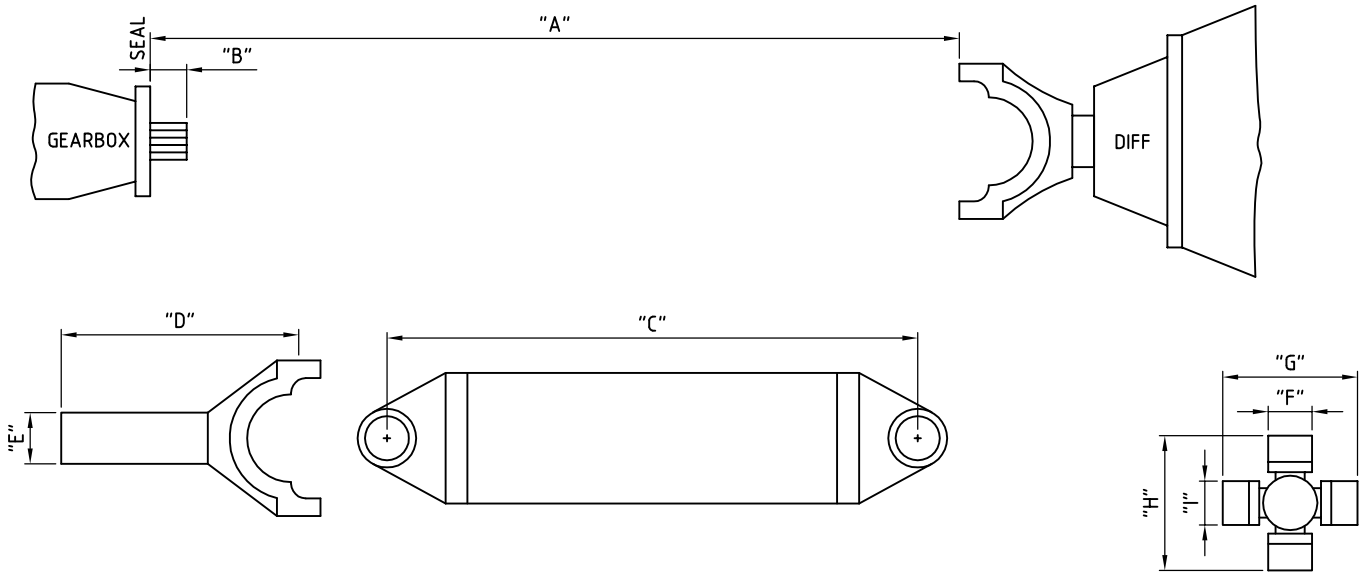
# DRIVESHAFT ORDER FORM

OFFICE USE
SN:
INV:

BILLING ADDRESS	SHIPPING ADDRESS
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NAME: .....	NAME: .....
ADDRESS: .....	ADDRESS: .....
SUBURB: .....	SUBURB: .....
STATE: .....	STATE: .....
POSTCODE: .....	POSTCODE: .....
PHONE: .....	PHONE: .....
FAX: .....	
E-MAIL: .....	

## DRIVESHAFT DETAILS



CAR MAKE	: .....		
CAR MODEL	: .....	A	: .....
GEARBOX TYPE	: .....	B	: .....
REAR END TYPE	: .....	C	: .....
ENGINE HP	: .....	D	: .....
MAX. R.P.M	: .....	E	: .....
		F	: .....
		G	: .....
		H	: .....
		I	: .....
GEARBOX SPLINE COUNT	: .....		

ADDITIONAL INFORMATION:  
 .....

## CONTACT DETAILS

ALTRA 9  
 UNIT 2-143 GRANITE STREET  
 GEEBUNG  
 QLD, 4034

PHONE: (07) 3265 5200  
 FAX: (07) 3265 5155

WEB: [www.altra9.com.au](http://www.altra9.com.au)  
 EMAIL: [info@altra9.com.au](mailto:info@altra9.com.au)

- WHEN PLACING AN ORDER YOU AGREE TO OUR TERMS AND CONDITIONS
- TERMS AND CONDITIONS ARE AVAILABLE ON WEBSITE
- FULL PAYMENT IS REQUIRED BEFORE ORDER WILL BE PROCESSED

### PAYMENT METHODS

EFTPOS, CREDIT CARD(1.5% SURCHARGE), CASH,  
 DIRECT DEPOSIT : ANZ, ALTRA 9 PTY LTD, BSB: 014 275 , ACCOUNT: 283 947 658