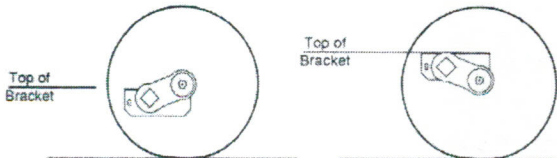
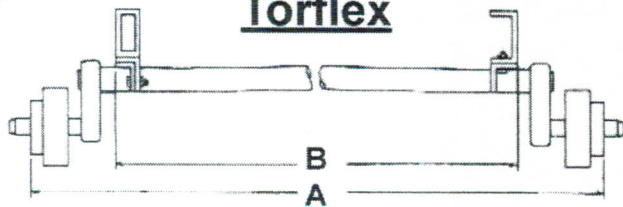


Customer Name / Number: _____
 Address: _____
 City, State, Zip: _____
 Phone / Fax / E-mail: _____
 Contact / PO / Date: _____

Torflex



22.5up 10up Zero 10dn 22.5dn 45dn
 (circle one)

Quantity: _____

Capacity: _____

Lube (circle one): Grease EZ-Lube Never-Lube Oil

Hub Bolt Pattern: 4-4.0 5-4.5 5-4.75 5-5.0
 (circle one)

MHU UTG 5-5.5 6-5.5

8-6.5 (studs 1/2", 5/8" or 9/16")

Hub Face (letter "A"): _____

Out Bracket (letter "B"): _____

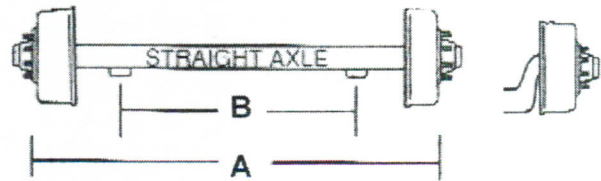
Brakes (circle one): Idler Elec. Hyd. Disc

Bracket Profile (circle one): High Low 3"

Bracket Orientation (circle one): Standard Reverse

Misc. Info: _____

Sprung



Straight or 4" Drop
 (circle one)

Quantity: _____

Capacity: _____

Lube (circle one): Grease EZ-Lube Never-Lube Oil

Hub Bolt Pattern: 4-4.0 5-4.5 5-4.75 5-5.0
 (circle one)

MHU UTG 5-5.5 6-5.5

8-6.5 (studs 1/2", 5/8" or 9/16")

Hub Face (letter "A"): _____

Spring Center (letter "B"): _____

Brakes (circle one): Idler Elec. Hyd. Disc

Spring Orientation (circle one): Over Under

Spring Type (circle one): Eye-To-Eye Slipper

Misc. Info: _____