



**UNITED WHEEL REPAIR**

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**Please fill out this form completely and enclose it in the box with your wheel(s).**

First & Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt/Suite: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

Please describe the type of work you want done to your wheel(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We accept Visa, Mastercard, Discover & Paypal.

Terms & conditions: We assume no liability for the wheels shipped to us because they are assumed to be damaged. Customer is responsible for all shipping charges. A \$50 deposit may be required for repairs over \$150.

I agree to the terms & conditions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_