

Name _____

City _____ State _____ Zip _____

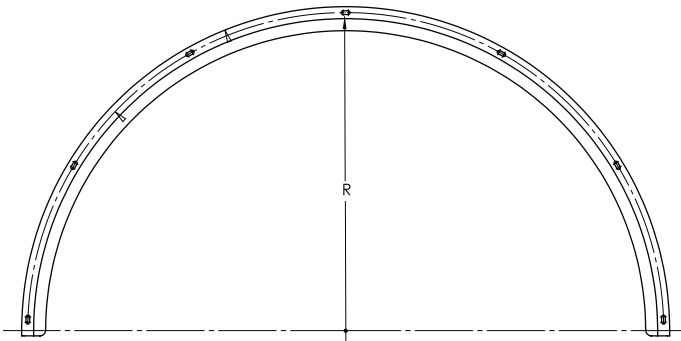
Company _____

Phone _____

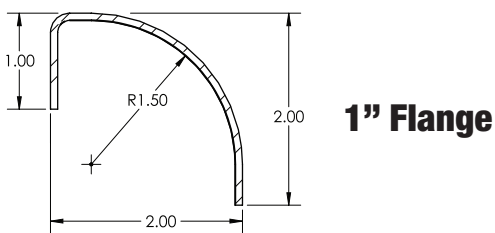
Address _____

email _____

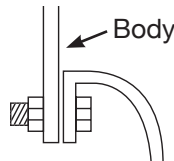
Fenderette with Flange



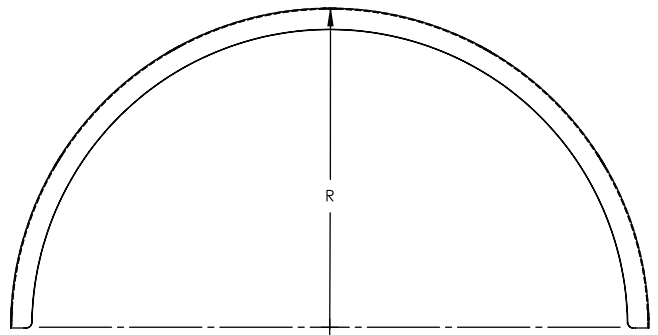
Radius* Required: _____



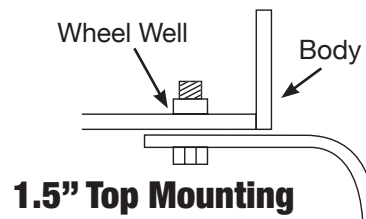
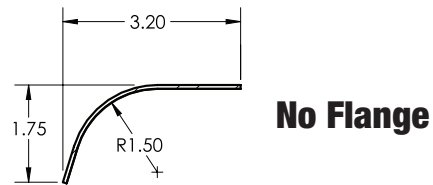
Mounts on Flange



Fenderette without Flange



Radius* Required: _____



Initial Order Quantity: _____

Estimated Annual Usage: _____

Number of Slotted Mounting Holes: _____

Size of Slotted Mounting Holes: 0.313" x 1.2" 0.313" x 0.75" 0.187" x 0.75"

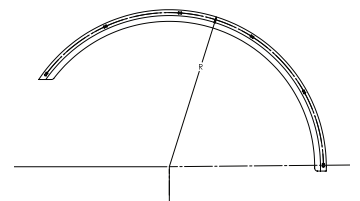
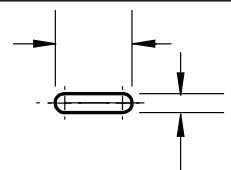
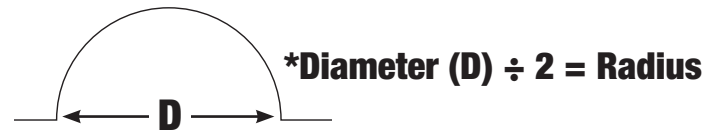
Check All That Apply:

Area to be Straightened (if any) Beyond Center Line: _____

If not equal, Length of Fenderette on each side of Center Line: _____ C/L _____

I need a Custom Fenderette—Please Contact Me. **Note:** Customization requests will be accommodated within our manufacturing capability. Lead times will increase.

Comments: _____



Please email this form, questions, drawings and CAD files to engineering@realwheels.com