



K&T VINTAGE SPORTS CARS, LLC CUSTOMER INFORMATION SHEET

Date _____

CUSTOMER INFORMATION

Name _____

Address _____

City _____ State _____ ZIP _____

CONTACT INFORMATION – Please check phone number you prefer us to use

Home phone _____ Work phone _____

Cell phone _____ Email _____

VEHICLE INFORMATION

Year _____ Make _____ Model _____

VIN # _____ Color _____

Odometer _____

License Plate # _____

Insurance Co. _____ Policy # _____

HOW DID YOU HEAR ABOUT K&T VINTAGE SPORTS CARS?

WORK REQUESTED
