



## MOTORCYCLE SUSPENSION | SERVICE REQUEST

Would you like to send us your motorcycle suspension for re-valving or service? Follow these two simple steps:

**Step 1: Fill out the Request Form below.**

**Step 2: Send your Request Form *and* suspension to:** Carl's Cycle Sales, 5550 W. State Street, Boise, ID 83703

**\*\* Important: Please remove fork bleeders and replace with stock screws before shipping \*\***

### REQUEST FORM

What date do you request your suspension to be returned by? \_\_\_\_\_

**Service Requested:** ☐ Rebuild ☐ Re-valve (includes rebuild)

First and Last Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Age \_\_\_\_\_

Weight \_\_\_\_\_

Height \_\_\_\_\_

Where do you ride? \_\_\_\_\_

**Skill Level:** ☐ Beginner ☐ Intermediate ☐ Experienced ☐ Pro ☐ AMA Pro

**Bike Type:** ☐ Motocross ☐ Desert ☐ Trail/Play ☐ Dual Sport ☐ Other \_\_\_\_\_

**Bike Specifications:** Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

**What type of suspension do you prefer:** ☐ Soft ☐ Standard ☐ Firm

**Please let us know if you have any of the following accessories on your bike (select all that apply):**

☐ Oversize Tank ☐ Luggage ☐ Front Saw Mount ☐ Rear Saw Mount

**How many hours since your last service?** \_\_\_\_\_



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Have you had any previous suspension modifications done? If so, explain.

What address would you like us to return the suspension to?

Return Shipping Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

If your billing address is different than the shipping address above, please include your billing address below:

Billing Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**Shipping Options:** How would you like us to return your suspension? ☐ Next Day ☐ 2-Day ☐ Ground

Thank you! Please call 208-853-5550 with any questions.