



AUTHORIZED LEATHER PROGRAM

ORDER FORM

Enterprise - Roadwire Vehicle Configuration Form		GROUP #	BRANCH #
DEALER NAME		PHONE	EMAIL
CONTACT PERSON		ORDER DATE	
VEHICLE LOCATION		LOT CONTACT AND PHONE NUMBER	
SALE STATUS: <input type="checkbox"/> PRE SALE (UPS) <input type="checkbox"/> DURING SALE (POP) <input type="checkbox"/> AFTER SALE (AFT)			

STOCK #	VIN #

VEHICLE INFORMATION								
YEAR	MAKE	MODEL	<input type="checkbox"/> Coupe	<input type="checkbox"/> Convertible	<input type="checkbox"/> Sedan	<input type="checkbox"/> SUV		
TRIM LEVEL			OE INTERIOR COLOR		<input type="checkbox"/> Wagon	<input type="checkbox"/> Reg Cab	<input type="checkbox"/> Ext Cab	<input type="checkbox"/> Crew Cab

SEAT CONFIGURATION				Check all applicable boxes	
FRONT SEATS	<input type="checkbox"/> Power	<input type="checkbox"/> Buckets	<input type="checkbox"/> 40/20/40	REPLACING OEM LEATHER <input type="checkbox"/> YES <input type="checkbox"/> NO	
	<input type="checkbox"/> Manual	<input type="checkbox"/> 60/40	<input type="checkbox"/> Bench		
MIDDLE SEATS	<input type="checkbox"/> Solid	<input type="checkbox"/> 40/20/40	<input type="checkbox"/> With Armrest		
	<input type="checkbox"/> Bucket	<input type="checkbox"/> Bench	<input type="checkbox"/> No Armrest		
3rd ROW SEATS	<input type="checkbox"/> Solid	<input type="checkbox"/> 50/50	<input type="checkbox"/> With Armrest		
	<input type="checkbox"/> 60/40	<input type="checkbox"/> Bench	<input type="checkbox"/> No Armrest		

SHIPPING METHOD	COMMENTS
<input type="checkbox"/> GROUND <input type="checkbox"/> OVERNIGHT	

For Roadwire Internal Use Only:

SALES ORDER NUMBER	PART NUMBER	CUSTOMER NUMBER
SHIP DATE	WAREHOUSE LOCATION	INSTALLATION PARTNER