



1511 Broad Street ~ Perkasie PA 18944
215/249-9957

CARBURETOR SPECIFICATION SHEET
New/Rebuild/Restoration/Modification

Please complete this form and send in with your carburetor to us at the above address.

DATE: _____

BILLING INFORMATION:

Contact: _____ Home Phone: _____
Customer/Company: _____ Daytime Phone: _____
Street: _____ Cell Phone: _____
City/State/Zip: _____ Email Address: _____

Terms: COD _____ Other _____

Credit Card:

Visa _____ Mastercard _____ Card Number: _____
Expiration Date: _____ Three Digit ID: (On back of card) _____
Cardholder's Name: _____ Cardholder Signature: _____
Address Verification: Street# _____ Zip Code: _____

SHIPPING INFORMATION:

Contact: _____ Home Phone: _____
Customer/Company: _____ Daytime Phone: _____
Street: _____ Cell Phone: _____
City/State/Zip: _____ Email Address: _____

UPS Shipping is used.

Ground _____ 3-Day _____ 2-Day _____ 1-Day _____

Work Description/Comments: _____

Dated Needed By: _____

CUSTOMER: _____

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SPECIFICATIONS:

Application: Street _____ Towing _____ Drag Strip _____ Other _____

Circle Track _____ Track Size _____ Dirt _____ Asphalt _____

Car Type: Year _____ Make _____ Model _____ Weight(with driver) _____

Engine: Type/Make _____ Size _____ Cu In/HP _____ RPM Range _____

Valve Size: Intake _____ Exhaust _____ Cylinder Head Type: _____

Compression _____ Comb Chamber CC's _____

Cam Type: Hydraulic or Solid _____ Roller or Flat Tappet _____

Gross Valve Lift: Intake _____ Exhaust _____

Duration at .050: Intake _____ Exhaust _____ Lobe Separation _____

Intake Manifold: Make _____ Model _____

Transmission: Make _____ Trans Brake: Yes _____ No _____

Rear Gear Ratio: _____ Tire Size: _____

Torque Converter: Make _____ Stall Speed: _____

Mufflers: Yes _____ No _____ Throttle Stop: Yes _____ No _____

Fuel Pump: _____ Fuel Regulator: _____

Supercharger: Roots _____ Blowthru _____ Turbo _____ Boost (PSI) _____

Nitrous: (1st Stage) _____ (2nd Stage) _____ (3rd Stage) _____