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## FILL OUT THIS FORM TO JUNK/SELL YOUR VEHICLE

DATE: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

ADDRESS : \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE# \_\_\_\_\_ CELL# \_\_\_\_\_

FAX# \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

### AUTO INFORMATION

VIN# \_\_\_\_\_

YEAR: \_\_\_\_\_ MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ COLOR: \_\_\_\_\_

DOES THE VEHICLE HAVE A TITLE: Yes / No / NOT SURE \_\_\_\_\_

DOES THE VEHICLE HAVE DAMAGE: Yes / No / NOT SURE \_\_\_\_\_

DOES THE VEHICLE HAVE A GOOD MOTOR: Yes / No / NOT SURE \_\_\_\_\_

DOES THE VEHICLE HAVE A GOOD TRANSMISSION: Yes / No / NOT SURE \_\_\_\_\_

DOES THE VEHICLE HAVE FOUR TIRES: Yes / No / NOT SURE \_\_\_\_\_

DOES THE VEHICLE NEED A FLATBED: Yes / No / NOT SURE \_\_\_\_\_

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DRIVERS LICENSE#