Rear Axle Order Form Attention: Date: PO #: _____ Company Name: _____ Mailing Address: _____ Phone #: Fax #: Contact Person: _____ Tractor Size: Tractor Series: Tractor Serial #: Power Shift or ____ Non Power Shift 2 Wheel Drive or 4X4 Tag # _____ _____ 580L ____ 580M _____ 580MXT 580LXT Shipping: _____ Customer Arranges Freight **Customer MUST provide BOL and Address Labels** _____ Hagan Tractor Parts Arranges Freight and Invoices Customer Cheapest Way _____ Fastest Way 25% Restocking Fee + all freight charges on any miss ordered or cancelled rear axle orders Address to Ship Rear Axle to: _____ Residential Address Name or Business Commercial Address Do you own or have access to Y or N a forklift to unload rear axle Phone # from freight truck? Delivery Hours____ Extra Freight Charges Apply to Residential Addresses Return to: Hagan Tractor Parts, Inc. 7755 S Hwy 51 **Customer Signature** Broken Arrow, OK 74014 800-365-0602 - Phone 918-251-6393 - Fax

hagantrac@yahoo.com