



EVOLUTION SUSPENSION PRODUCTS

11279 Gwathmey Church Rd

Ashland, VA 23005

804-798-0990

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SUSPENSION WORK ORDER

Shipped date: _____

Your Information.	Ship to if different.
Name:	Name:
Address:	Address:
Address:	Address:
City, State, Zip	City, State, Zip
Telephone(s):	
Email(s):	

For return shipping, what carrier & method do you prefer? _____
(USPS, UPS, FEDEX, Ground, Overnight?)

Insurance amount? (default is amount of repair) _____

Type/Length of shocks: _____ AirShox _____ Factory Shox _____ Gas Shox _____ Other

Type of Work: _____ Rebuild Only _____ Restoration (painting, plating, total rebuild) _____ Shaft(s) Repair

Will you need the appropriate reducer bushings for your shocks? _____

If you need bushings, include Mounting bolt diameters, upper / lower: _____/_____

If you need bushings, include Frame and Swingarm Mount inside width, upper/lower: _____/_____

Rider weight with gear: _____ Riding Level: _____ Type of riding: _____

Bike: weight if known: _____ Brand: _____ Year: _____ Model: _____

AIRSHOXES, Jobs Requiring New Springs: For models not listed in the manual or website SLR chart or have Aftermarket or Modified Swingarms, please include the following information, measure from center of axle, bolt, or pivot:

A _____ Swingarm Pivot to upper shock mount on frame

B _____ Swingarm Pivot to lower shock mount on Swing-arm

C _____ Swingarm Pivot to rear axle (selct the mid point of the chain adjustment slide)

D _____ Length of OEM stock shock fully extended (hole center to hole center)

E _____ Length of OEM stock shock travel (including 1/2 of bumper thickness)

F _____ Manufacturers claimed wheel travel if known

Additional Information: _____
