



**Mondello Performance Products, Inc.**

1103 Paso Robles St., Paso Robles, CA 93446  
Phone (805) 237-8808 Fax (805) 237-8814

## Carburetor Rebuild Specificaton Form

How to order: Please fill out this form completely, then print this form. Ship your carburetor and this form to the address above. If any of the below systems that we ask for are stock, please put the word "Stock" in that space. (Use your 'Tab' key to move to the next field.)

**Bill-To:** (If you are using a credit card, this address must match the address on your credit card statement.)

Name: \_\_\_\_\_ Customer #: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Daytime Contact Phone #: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Billing Method:      Credit Card              Check/Money Order              COD

Credit Card #: \_\_\_\_\_ Expiration: \_\_\_\_\_

Is the 'Ship-To' address the same as the 'Bill-To' address?    Yes              No

**Ship-To:**

Name/Company: \_\_\_\_\_ Customer #: \_\_\_\_\_

Shipping Address 1: \_\_\_\_\_

Shipping Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Daytime Contact Phone #: \_\_\_\_\_

**Return Shipping Method:**    3 Day Express              2 Day Express              Priority Overnight

Carburetor Mfg/Model #: \_\_\_\_\_ Electric choke: Yes      No

Engine Year: \_\_\_\_\_ Size/CI: \_\_\_\_\_ Street:      Street/Strip:      Racing:

Transmission: \_\_\_\_\_ Gear Ratio: \_\_\_\_\_

Camshaft Mfg: \_\_\_\_\_ Lift: \_\_\_\_/\_\_\_\_ Dur @ .050 Int: \_\_\_\_ Exh: \_\_\_\_\_

Intake Manifold Mfg: \_\_\_\_\_ Model#: \_\_\_\_\_ Nitrous: Yes      No

Heads: \_\_\_\_\_ Ported: Yes      No

Int. Valve: Length: \_\_\_\_\_ Diameter: \_\_\_\_\_ Exh. Valve: Length: \_\_\_\_\_ Diameter: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_