

SERVICE REQUEST

GENERAL INFO

Rider/Shop Name: _____

E-mail: _____ Phone: _____

Address: _____

PAYPAL INFO

Account: _____

CREDIT CARD INFO

Number: _____ Exp. Date: _____ "CVC" code: _____

(We are happy to call if billing info not filled in)

MAVERICK FORK *circle*

DUC32 SC32 DUC or SC29er 650B set-up

MAVERICK SHOCK *circle*

ML7.2 ML7/5 ML8 Durance ML7.0 Monolink

SUSPENSION *circle*

Fox RockShox Marzocchi Manitou X-Fusion Cane Creek DVO Other

RIDE STYLE *circle*

Aggressive Smooth Clydesdale Light Light but hard Fast no jumps Terrain park

APPROXIMATE RIDER WEIGHT WITH PACK

AVERAGE AIR PRESSURE IN FORK/SHOCK

TYPE OF TERRAIN RIDDEN

LIST ANY COMPLAINTS WITH PRODUCT

HOW WOULD YOU PREFER IT TO RIDE *circle*

Softer Firmer Less brake dive Higher or lower compression More rebound Other

If other, please explain:

ADDITIONAL INFO

Please make sure product is clean and well packed.



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