

NAME: _____
ADDRESS: _____
CITY: _____ STATE _____ ZIP _____
HOME PHONE: _____ WORK: _____
FAX: _____

MAKE & MODEL: _____ YEAR: _____
ENGINE MANUFACTURER: _____ TYPE: _____
YEAR (IF AVAILABLE): _____ CHECK FOR FE _____

CHECK ONE: ___ DRAG ONLY ___ STREET & STRIP ___ STREET ONLY

OTHER: _____
TYPE OF TRANSMISSION: _____ TRANSBRAKE: _____
ENGINE SIZE: _____ COMPRESSION: _____
HORSEPOWER: _____ BORE/STROKE: _____
TORQUE: _____ TYPE OF HEADS: _____
INTAKE VALVE SIZE: _____ F.I.? _____ CARB? _____
BLOWER? _____ NITROUS? _____ ALCOHOL? _____
CAMSHAFT LIFT- INTAKE: _____ EXHAUST: _____
DURATION @ .050- INTAKE: _____ EXHAUST: _____
CAM CENTER LINE: _____ RPM RANGE: _____
HYDRAULIC _____ SOLID _____ ROLLER _____
SHIFT RPM's: _____ TRAP RPM's: _____
CURRENT CONVERTER- SIZE: _____ INPUT SHAFT SPLINE: _____
FLYWHEEL- SIZE: _____ COUNTERWEIGHT: _____
REAR-END RATIO: _____ TIRE SIZE: _____
HEADER SIZE: _____ SUSPENSION: _____
VEHICLE WEIGHT: _____ CLASS: _____ ET: _____
MPH: _____ 60 FT TIME: _____

NOTES:

FAX TO: *DYNAMIC Racing Transmissions / Torque Converter Techniques*
(203)315-0352, If unable to fax, call (203)315-0138 or
E-mail us at *dynamicracemail@aol.com*

