

# ULTIMATE POWER TRUCK

## How to select the proper Conversion Kit

|                               |                                     |   |
|-------------------------------|-------------------------------------|---|
| Select the intended use:      | <input type="checkbox"/> Private    | <input type="checkbox"/> Commercial         |
| Select the expected run time: | <input type="checkbox"/> Continuous | <input type="checkbox"/> Intermit as needed |

### List of Power Demands

*(list the tools you plan to power such as welders, lighting, pumps, compressors, grinders, hand tools, saws, etc.)*

Will these all be used at the same time?  Yes  No

| TOOLS | POWER TYPE (VOLTAGE) | POWER AMOUNT (AMPS) | PHASE |
|-------|----------------------|---------------------|-------|
|       |                      |                     |       |
|       |                      |                     |       |
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### Will You Be Powering Buildings or Trailers

*(list your building square footages, the service size of your breaker panels amps, single or 3 phase configuration, the voltage and if you have plug receptacles for outside power sources in place)*

Will these all be used at the same time?  Yes  No

| BUILDING TYPE | SIZE OF BUILDING | SERVICE SIZE (AMPS) | VOLTAGE | PHASE | PLUG READY |
|---------------|------------------|---------------------|---------|-------|------------|
|               |                  |                     |         |       |            |
|               |                  |                     |         |       |            |
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|               |                  |                     |         |       |            |

How to select the proper Conversion Kit (con't)

Is your truck 4 wheel?  YES  NO

What Bed style do you have?  FLAT  BUCKET  CONSTRUCTION MULTI BOX  
 DUMP  BOX  OTHER

What Cab style do you have?  SINGLE  EXTENDED  DUAL

What Brand do you have?  FORD  GM  
 DODGE  OTHER \_\_\_\_\_

What Fuel type?  DIESEL  UNLEADED GAS  
 PROPANE  CNG

What Transmission do you have?  MANUAL  AUTOMATIC

Do you need financing?  YES  NO

When do you want your truck converted? Date: \_\_\_\_\_

Name, Company or Municipality: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Location: \_\_\_\_\_