

The Funeral Car Store

Listing Request Form:

Fax#: 800-785-2830

VEHICLE INFORMATION: VIN#: _____

Year _____ Chassis _____ Coachbuilder _____

Model _____ Type _____ Mileage _____

Exterior Color _____ Interior Color _____ Condition _____

Do you have the Title in your possession? _____

Loan Payoff on Vehicle \$ _____ Bank Name or Lien Holder _____

Asking Price \$ _____

Selling Features / Additional Vehicle Options: _____

SELLER INFORMATION: (This will NOT be displayed in the listing)

First Name _____ Last Name _____

Business Name _____

Address _____ State _____ Zip _____

Business Phone _____ Home Phone _____

Cell Phone _____ EMAIL _____

Comments: _____

Please EMAIL pictures (Exterior & Interior) to: thefuneralcarstore@verizon.net