

# Sell or Part Exchange Your Current Vehicle



Full Name .....

Address ..... City .....

Post Code .....

Telephone Contact Number ..... Email Address .....

Reg Number ..... Make .....

Model ..... Colour .....

Gearbox ..... Fuel Type .....

Mileage .....

Additional Specifications e.g. Sat Nav, Leather, Alloys

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.....

MOT Expiry Date ..... Service History .....

How would you describe your cars general condition  Excellent  Good  Average  Poor

Is your car in good mechanical order?  Yes  No

Please note here bodywork/paintwork required  
.....  
.....

Price Required ..... When are you looking to part exchange your car? .....

**Once complete, please fax to:  
01482 572940**

**Or post to:**  
Calvert Vehicle Solutions, 94-96 Calvert Lane, Hull, HU4 6PJ