New Jersey Diesel Emissions & DOT Inspections Inc.

126 Bennett Place, Hightstown New Jersey 08520
Phones: 732 299 3996 Fax 609.443.5857 PIF 001408
Email: Michael@NewJerseyDieselinspections.com

Service Request Form (Please attach copy of current Registrations)

Company Name:_____ Phone No:_____
Mail Address:_____
Address location for tests performed:_____
DOT Number:_____ Total Vehicles in Company Fleet including cars _____
Contact Person_____ Email: _____

List of Fleet **Must** Indicate the inspection test needed with: **'G' or 'D' or 'X'**

Truck / Unit #	Make	Year	Model	License Plate	VIN#	Current Registration Expiration Date	**G**as or **D**iesel Emissions Test	DOT **X**	Trailer **X**

Terms and conditions:

I understand and agree that appointments must be cancelled 7 days prior to scheduled service date. If services requested cannot be completed due to weather, the appointment shall be re-scheduled with no penalty. If all services requested are not completed at scheduled time and at no fault of New Jersey Diesel Emissions & DOT Inspections Inc., I understand that we are responsible for payment of all scheduled vehicles and services in full, less the price of the sticker(s) and that this payment does not cover return trip or subsequent re-scheduling of any vehicles later or time. Billing for services scheduled to be done but not rendered at scheduled time due to extenuating circumstances may be billed at the discretion of New Jersey Diesel Emissions & DOT Inspections Inc. and on a case by case basis.

_____ _____
Signature of company representative Date

_____For New Jersey Diesel Emissions & DOT Inspections Inc. use Only_____

Date of Service:_____ Time of Service:_____