Work Request Form

Mail this completed form along with any necessary parts to:
Rinken Mods
455 8th St SW
Plainview, MN 55964

Motorcycle/ATV/Snowmobile Information:

Year: _____ Manufacturer: _____

Model: _____

Customer Information:

Name: _____

Phone 1: _____ Phone 2: _____

Email: _____

Payment Method:

- ☐ Cash or Check (Mail with this form)
- ☐ Pay Pal (Email address must be entered under Customer Information)
- ☐ Credit Card (Call with card information)
  - ☐ MasterCard
  - ☐ Visa

Remember to include return shipping fee with payment!

Ship To (Return Address) Information:

Address 1: _____

Address 2: _____

City: _____

State: _____ Zip: _____

Describe work needed (if requesting a KTM 65 package, indicate which level per the rinkenmods.com website)

Requested Return Date: ____/____/____

IMPORTANT INFORMATION: Payment must be received before parts will be returned to you. If paying by check, please include with this Work Request Form. This form must accompany all work orders!