

**R.E.V.V.E.S**  
**Roving Eye Visual/Verbal Evaluation Service – Booking Order**

Motorcycle Transport & Logistics – Booking Order for evaluation of motorcycle / item  
Print this form, fill in your details and fax the form to Motorcycle Transport & Logistics  
**Fax +61 3 9419 8477** Office No. +61 3 9419 8400. We will contact you to confirm details.

**Details of person requesting evaluation of motorcycle or item**

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Time available: From: \_\_\_\_\_ To: \_\_\_\_\_

Telephone: \_\_\_\_\_ Time available: From: \_\_\_\_\_ To: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Fax: \_\_\_\_\_

**Contact details of person, and location of motorcycle / item to be viewed**

Motorcycle Model / Item: \_\_\_\_\_

Rego (or chassis number): \_\_\_\_\_

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Victoria

Post Code:

Telephone: \_\_\_\_\_ Time available: From: \_\_\_\_\_ To: \_\_\_\_\_

Telephone: \_\_\_\_\_ Time available: From: \_\_\_\_\_ To: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Fax: \_\_\_\_\_

**Other Details**

Special Instructions or Comments: \_\_\_\_\_

How you would like to receive information? Telephone Mail Email