



Ford 6.0L / International VT365 Engine Core Evaluation

SECTION I: CUSTOMER INFORMATION

User/Installer _____ Date _____

Dealer/Distributor Contact _____ Phone #() _____

Engine Part Number _____ Serial Number _____

SECTION II: NON TYPE FOR TYPE OR JUNKYARD CORE DEDUCTION

If returning a core of a type different than the engine being purchased (ie: different displacement or horsepower rating), junkyard or disassembled core that cannot be remanufactured, the deduction will be up to a full core deposit.

\$

SECTION III: CORE DEDUCTIONS

The following table represents the deductions for missing or damaged components. Missing miscellaneous fittings will be charged at cost. Oil and coolant must be drained (including oil cooler), and oil filter must be removed and discarded. Fuel Filters must not be removed.

- | | |
|---|---|
| 1) <input type="checkbox"/> Block \$1,000 | 10) <input type="checkbox"/> Oil Cooler \$125 |
| 2) <input type="checkbox"/> Cylinder Heads (ea) \$300 | 11) <input type="checkbox"/> Oil Pan \$125 |
| 3) <input type="checkbox"/> Exhaust Manifolds (ea) \$100 | 12) <input type="checkbox"/> Rock Arm Covers (ea) \$50 |
| 4) <input type="checkbox"/> Front Cover \$150 | 13) <input type="checkbox"/> Turbocharger/Housing/Pedestal \$400 |
| 5) <input type="checkbox"/> Fuel Filter Assembly \$100 | 14) <input type="checkbox"/> Vibration Damper \$100 |
| 6) <input type="checkbox"/> High Pressure Oil Pump \$150 | 15) <input type="checkbox"/> Intake Manifold \$125 |
| 7) <input type="checkbox"/> Fuel Injectors (ea) \$100 | 16) <input type="checkbox"/> Coolant/Oil Filter/Oil not removed \$500 |
| 8) <input type="checkbox"/> Fuel Return Lines \$25 | 17) <input type="checkbox"/> Original Engine Skid \$300 |
| 9) <input type="checkbox"/> Flywheel Housing/Rear Cover \$600 | |

TOTAL EXTERNAL DEDUCTIONS
(add lines 1 through 17)

\$

SECTION IV: NET CORE CREDIT

CORE DEPOSIT (Complete and Assembled) - DEDUCTIONS (Sum of Section II, III and IV) = NET CORE CREDIT

SECTION V: AUTHORIZATION

Dealer/Distributor Signature _____ Date _____

Inspector Signature _____ Date _____

Inspector Phone #() _____