Reader Response Form

Are you having trouble identifying a part on your car? Is there a part on your car that you believe is original, but its casting number is not listed in this book? Are there codes that you don't understand? Are you interested in the national trim validation service mentioned in Chapter 1? If so, copy this form, fill it out, noting where your question or comment is, and mail it to the author at the address listed to the right. Help make this book the best reference it can be.

Send to:

Alan Colvin
3005 Barret Ave.
Plant City, FL 33566
www.AlanColvin.com

Your Name: _____   Phone: _____

Address: _____   Fax: _____
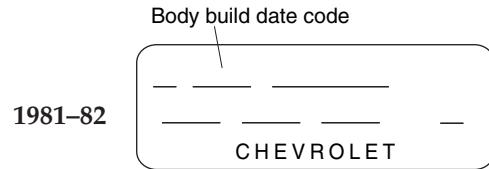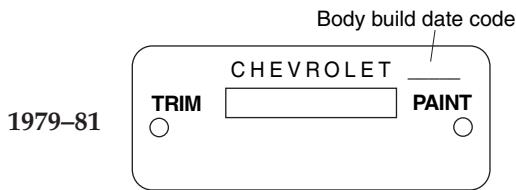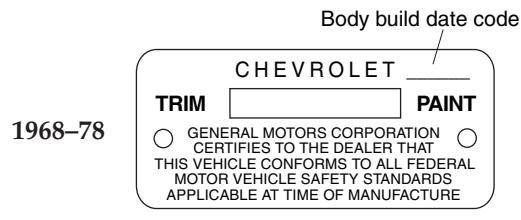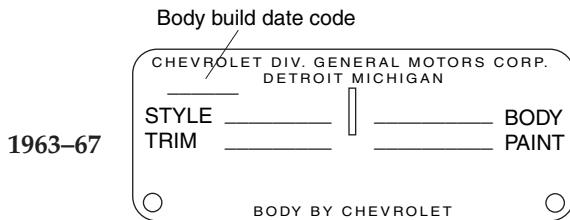
_____   E-Mail: _____

VIN: _____   Series: _____

Model: _____   Body Style: _____

Trim Tag (fill in):

Body build date code

1963–67

CHEVROLET DIV. GENERAL MOTORS CORP.
DETROIT MICHIGAN
STYLE _____ | _____ BODY
TRIM _____ _____ PAINT
BODY BY CHEVROLET

Body build date code

1968–78

CHEVROLET _____
TRIM [_____] PAINT
○ GENERAL MOTORS CORPORATION ○
CERTIFIES TO THE DEALER THAT
THIS VEHICLE CONFORMS TO ALL FEDERAL
MOTOR VEHICLE SAFETY STANDARDS
APPLICABLE AT TIME OF MANUFACTURE

Body build date code

1979–81

CHEVROLET _____
TRIM [_____] PAINT
○   ○

Body build date code

1981–82

__ _____ _____ _____
_____ _____ _____ __
CHEVROLET

Trim Tag Position (be specific): _____

Engine code: _____   Exhaust   LH   RH   Maincase #: _____

Engine VIN stamp: _____   Casting #: _____/_____   Maincase Date: _____

Stamp: ❏ Gang ❏ Individual   Casting Date: _____/_____   Extension #: _____

Extension Date: _____

Block Casting #: _____   Distributor: _____   Sidecover #: _____

Block Casting Date: _____   Date Code: _____   Sidecover Date: _____

Main Bearing Cap: ❏ 2-bolt ❏ 4-bolt   Vacuum Unit: _____   Front Bearing Retainer #: _____

Intake Casting #: _____   Alternator: _____   Rear Axle Type: _____

Intake Casting Date: _____   Date Code: _____   Axle Code: _____

Head Casting #: _____   Carburetor Type: _____   Build Date: _____

Head Casting Date: _____   Stamping #: _____   Center Section #: _____

Material: ❏ Cast Iron ❏ Aluminum   Date Code: _____   Positraction #: _____

Symbol at end of head (if any): _____   Primary Metering #: _____   Length:

Secondary Metering #: _____   • Axle shaft (each) _____

Water Pump #: _____   • Between spring seat centers _____

Casting Date: _____   Transmission Type: _____

Build Date: _____   Does car have the protect-o-plate?

Crank Casting # _____   Date Location: _____   ❏ Yes ❏ No

Camshaft #: _____   VIN Stamp #: _____

Does car have the build sheet located under gas tank? ❏ Yes ❏ No

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List all special options that you believe the car was delivered with: _____

_____

—Please Fill Form Out Completely—