

Vehicle Inspection Form

Inventory ID:	Asset Number:	Fair Market Value:
Short Description: Year _____ Make _____ Model _____		
VIN: _____	Title: Clean Title Salvage Title No Title Court Documents Only SF97 Form Other	
Odometer: _____ Miles Kilometers Hours	Odometer Accurate? Yes No Unknown	
Long Description: This Vehicle: Starts Starts with a Boost & Runs/Drivable Engine Runs Does Not Run For Parts Only Engine- Type: ____ L, V ____ Gas Diesel Engine Propane/Natural Gas Gas/Electric Hybrid Engine Condition: Runs Needs repair is in unknown condition Repairs needed: _____ This vehicle was maintained every _____ Days Hours Miles/Kilometers Date Removed from Service: _____ Maintenance Records: Available Not Available For Inspection Transmission: Automatic Manual ____ Speed Condition: Operable Needs repair Is Unknown Condition Repairs Needed: _____ Drivetrain: 2 Wheel Drive 4 Wheel Drive Condition: _____ _____ Exterior: Color: _____ Windows: No Cracked Glass Cracked _____ Minor: Dents Scratches Dings Tire Condition: _____ Tread: _____ #Flat _____ Hubcaps # _____ Major Damage to: _____ Additional Damage: _____ Decals: None Have Been Sprayed or Have been Removed & Impressions Remain No impressions Emergency equip: None Has been removed & There are holes in the exterior There are no holes _____ Interior: Color _____ Cloth Vinyl Leather Damage to Seats: _____ Damage to Dash/Floor: _____ Radio: Stock or Brand & Model: _____ AM AM/FM AM/FM Cassette AM/FM CD AC Condition: Cold Unknown No AC Air Bags: Driver's Side Dual Cruise Control Tilt Steering Remote Mirrors Climate Control Power: Steering Windows Door Locks Seats		
Additional Equipment: _____ Manufacturer _____ Model _____ Serial # _____ Tool Box Light Bar Ladder Rack Utility Body: Brand _____ Hitch: Type _____		
Location of Asset: _____		