

Vehicle Inspection Form

Inventory ID:	Asset Number:	Fair Market Value:
----------------------	----------------------	---------------------------

Short Description:
Year _____ Make _____ Model _____

VIN:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Title Restriction: ☐ Y ☐ N

Odometer:

--	--	--	--	--	--

☐ Miles ☐ Kilometers Odometer Accurate ☐ Y ☐ N: _____

Long Description:
This Vehicle: ☐ Starts ☐ Starts with a Boost & ☐ Runs/Driveable ☐ 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
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: _____
For more information contact: _____