

# Heavy Equipment Inspection Form

Inventory ID: <u>S1</u>	Asset Number: <u>S1</u>	Fair Market Value:
Short Description:		
Year <u>1986</u>	Manufacturer <u>KENWORTH</u>	Model <u>T600 A</u>
Long Description: Equipment Serial # <u>1XKAD29XXQK334527</u> [Required for all Marketing]		
This Equipment: <input type="checkbox"/> Starts <input checked="" type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Is Operable <input type="checkbox"/> Is not operable <input type="checkbox"/> For Parts Only		
Engine: ____ L, V ____ <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Diesel engine Engine: <input type="checkbox"/> Hours _____ <input checked="" type="checkbox"/> Miles <u>297,424</u>		
This vehicle was maintained every _____ <input type="checkbox"/> Hours		
Engine Manufacture: <u>CUMMINS</u> Condition: <input checked="" type="checkbox"/> Is Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is in Unknown Condition		
Engine Repairs needed: _____		
Transmission: <input type="checkbox"/> Automatic <input checked="" type="checkbox"/> Manual ____ Speed Transmission: <input type="checkbox"/> Hours _____ <input type="checkbox"/> Miles _____		
Transmission Manufacture: _____ Condition: <input checked="" type="checkbox"/> Is Operable <input type="checkbox"/> Needs Repair <input type="checkbox"/> Is Unknown		
Transmission Repairs Needed: _____		
Drivetrain: <input type="checkbox"/> 2WD <input type="checkbox"/> 4WD <input type="checkbox"/> AWD Condition: _____		
Date Removed From Service: <u>2024</u> Maintenance Records: <input type="checkbox"/> Available <input checked="" type="checkbox"/> Not Available For Inspection		
<u>Exterior:</u> Color <u>BLUE</u> Windows: <input checked="" type="checkbox"/> No cracked glass <input type="checkbox"/> Cracked _____		
Minor <input checked="" type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input checked="" type="checkbox"/> Dings Tire Condition: <input checked="" type="checkbox"/> Low ____ <input type="checkbox"/> Flat ____		
Damage to: _____		
Additional Damage to: _____		
# Of Wheels <u>10</u> # Of Axles <u>3</u> # Of Tracks _____		
Dimensions: _____		
Decals: <input type="checkbox"/> None <input type="checkbox"/> Have been sprayed <input type="checkbox"/> Have been removed <input type="checkbox"/> Impressions remain <input type="checkbox"/> No impressions		
<u>Interior:</u> Color <u>GRAY</u> <input checked="" type="checkbox"/> Cloth <input type="checkbox"/> Vinyl <input type="checkbox"/> Leather		
Damage to Seats: _____		
Damage to Dash/ Floor: _____		
Radio: Brand _____ <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD		
<input type="checkbox"/> Cruise Control Power: <input checked="" type="checkbox"/> Steering <input type="checkbox"/> Seats <input type="checkbox"/> AC <input checked="" type="checkbox"/> No AC Condition: <input type="checkbox"/> Cold <input type="checkbox"/> Unknown		
<u>Additional Equipment:</u> Manufacturer <u>TAIRMOBILE</u> Model <u>F14S4C04</u>		
Serial # <u>J40628</u> Condition: <input type="checkbox"/> Is Operable <input checked="" type="checkbox"/> Needs repair <input type="checkbox"/> Is in Unknown Condition		
Description: <u>MODEL -</u>		
Location of Asset: <u>Sewer Department 600 W. Main St.</u>		
For more information contact: <u>Matt 937-382-0803</u>		