

# Generic Inspection Form

Inventory ID: \_\_\_\_\_

Asset Number \_\_\_\_\_

Anticipated Sale Price: \_\_\_\_\_

Short Description: \_\_\_\_\_  
Year \_\_\_\_\_ Manufacturer \_\_\_\_\_ Model \_\_\_\_\_

**Please fill in or check if apply**

**Long Description:**

This Equipment:  Is Operable  Is Not Operable  For Parts Only  Needs Repair  The Condition is Unknown

Hours: \_\_\_\_\_ This equipment was maintained every \_\_\_\_\_  Hours  Days

Serial # \_\_\_\_\_

Repairs needed: \_\_\_\_\_  
\_\_\_\_\_

**Description of Use**

Color \_\_\_\_\_  Cloth  Vinyl  Leather  Metal  Plastic  Wood  Rubber

Minor damage to: \_\_\_\_\_

Major damage to: \_\_\_\_\_

Size: Length: Feet: \_\_\_\_\_ Inches: \_\_\_\_\_ Width/Depth: Feet: \_\_\_\_\_ Inches: \_\_\_\_\_ Height: Feet: \_\_\_\_\_ Inches: \_\_\_\_\_

Men's Size: \_\_\_\_\_ Women's Size: \_\_\_\_\_

**Additional Equipment:** Manufacturer \_\_\_\_\_ Model \_\_\_\_\_

Serial # \_\_\_\_\_ Condition:  Is Operable  Needs repair  Unknown Condition

Description: \_\_\_\_\_

**Additional Equipment:** Manufacturer \_\_\_\_\_ Model \_\_\_\_\_

Serial # \_\_\_\_\_ Condition:  Is Operable  Needs repair  Unknown Condition

Description: \_\_\_\_\_

**Additional Equipment:** Manufacturer \_\_\_\_\_ Model \_\_\_\_\_

Serial # \_\_\_\_\_ Condition:  Is Operable  Needs repair  Unknown Condition

Description: \_\_\_\_\_

**Comments:**

\_\_\_\_\_  
\_\_\_\_\_

**Location of Asset:** \_\_\_\_\_

**For more information contact:** \_\_\_\_\_