Vehicle Inspection Form

Fair Market Value: Inventory ID: Asset Number: **Short Description:** Year 2019 O 3 Title Restriction: □Y N ☑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: O.U., 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 D Hours Miles Maintenance Records: Available Not Available For Inspection Date Removed From Service: Transmission: Automatic Manual Speed Condition: Operable Needs repair Is Unknown Condition Repairs Needed: Drivetrain: 2 2 Wheel Drive 4 Wheel Drive Condition: 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 Color BLACK O'Cloth O Vinyl O Leather Interior: Damage to Seats: Damage to Dash/Floor: SMALL HOLES DIT EQUIP MOUNT Radio: Stock or Brand & Model: ______ DAM 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: Model ___ Serial # ____ ☐ Tool Box ☐ Light Bar ☐ Ladder Rack ☐ Utility Body: Brand ☐ Hitch: Type_ Location of Asset: For more information contact: Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.