Broke Frame **#19**

Vehicle Inspection Form

Inventory ID:	Asset Number:	Fair Market Value:

Short Description:
Year **2016**   Make **Ford**   Model **F-350**

VIN: **1FDRF3BT6GEB42845**   **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: **6.7** L, V **8** ☐ 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 **5,000** ☐ Days ☐ Hours ☑ Miles/Kilometers
Date Removed from Service: **3-2024**   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: **Good**

Exterior: Color: **White**   Windows: ☑ No Cracked Glass ☐ Cracked
Minor: ☐ Dents ☑ Scratches ☑ Dings   Tire Condition: **Good**   Tread: **Good** #Flat **0** Hubcaps # **4**
Major Damage to: **Broke Frame and needs grill.**
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 **grey**   ☐ Cloth ☐ Vinyl ☑ Leather
Damage to Seats: **None**
Damage to Dash/Floor: **None**
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: _____