Vehicle Inspection Form

Lot # __________________________ S/C $ ______________________

Check VIN: __________________________ Year __________ Make__________________

Model __________________________ Mileage: __________ Exterior Color: __________ Interior
Color __________________________

Disk #: __________________________ Pictures: F __________ I __________ R __________ Other __________

This vehicle: □ Starts __________ □ Starts w/Boost __________ □ Won’t Start __________ □ Runs __________

□ Is Drivable

Body Damage:

Minor body damage to the __________________________

Major body damage to the __________________________

Scratches and Dents:

□ No visible scratches or dents on exterior
□ Minor scratches and dents on exterior
□ Major scratches and dents on exterior
□ Minor scratches on exterior
□ Major scratches on exterior

Exterior:
Missing Items: __________________________

Tires:
The tread condition __________________________ Flat

Hubcaps:
□ The vehicle has all 4 hubcaps □ There are no hubcaps on the vehicle How many are missing

Windows:
□ No cracked glass □ The windshield is cracked □ The rear window is cracked
The door glass on __________________________ of the doors is cracked.

Interior Damage:
Minor damage to __________________________

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