

## Vehicle Condition Report

Customer Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # \_\_\_\_\_  
 Dealer Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone \_\_\_\_\_

**Vehicle:**  
 Year \_\_\_\_\_ Make \_\_\_\_\_  
 Model \_\_\_\_\_ Color \_\_\_\_\_  
 Style \_\_\_\_\_ Body \_\_\_\_\_  
 VIN \_\_\_\_\_  
 License # \_\_\_\_\_ Mileage \_\_\_\_\_

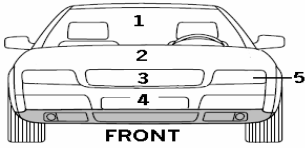
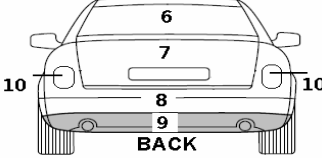
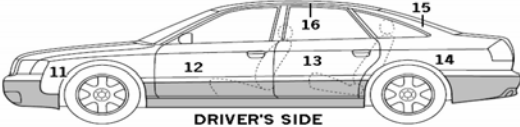
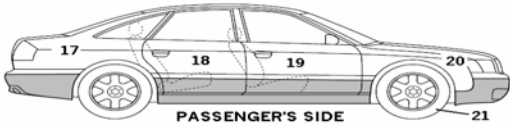
**CHECK OPTIONS INCLUDED ON VEHICLE**

- |                                       |                                       |  |   |  |                                       |
|---------------------------------------|---------------------------------------|--|---|--|---------------------------------------|
| <input type="checkbox"/> ABS 4 Wheel  | <input type="checkbox"/> Bedliner     | <input type="checkbox"/> Cruise Control    | <input type="checkbox"/> Moon or Sun Roof | <input type="checkbox"/> Power Windows       | <input type="checkbox"/> Wide Tires   |
| <input type="checkbox"/> Air Cond.    | <input type="checkbox"/> Camper Shell | <input type="checkbox"/> Custom Bumper     | <input type="checkbox"/> Power Door Locks | <input type="checkbox"/> Roof Rack           | <input type="checkbox"/> Sport Wheels |
| <input type="checkbox"/> AM-FM Radio  | <input type="checkbox"/> C.D.         | <input type="checkbox"/> Leather Interior  | <input type="checkbox"/> Power Seats      | <input type="checkbox"/> Running Boards      | <input type="checkbox"/> Stereo       |
| <input type="checkbox"/> Auto. Trans. | <input type="checkbox"/> C.D. Changer | <input type="checkbox"/> Luxury/Sport Pkg. | <input type="checkbox"/> Power Steering   | <input type="checkbox"/> Rear Sliding Window | <input type="checkbox"/> Tilt Wheel   |
|                                       |                                       |  |   | <input type="checkbox"/> Tow Package         |                                       |

**CONDITION OF VEHICLE**

**Indicate any damage to the vehicle in the space provided using your own words or the following legend. If None write None**

H – Hairline Scratch    PT – Pitted    T – Torn    B – Bent    GC – Class Cracked    M – Missing  
 SM – Smashed    R – Rusty    CR – Creased    S – Scratched    ST – Stained    BR – Broken    D – Dented

 <p style="text-align: center;"><b>FRONT</b></p>	1. _____ 2. _____ 3. _____ 4. _____ 5. _____	 <p style="text-align: center;"><b>BACK</b></p>	6. _____ 7. _____ 8. _____ 9. _____ 10. _____
 <p style="text-align: center;"><b>DRIVER'S SIDE</b></p>	11. _____ 12. _____ 13. _____ 14. _____	 <p style="text-align: center;"><b>PASSENGER'S SIDE</b></p>	15. _____ 16. _____ 17. _____ 18. _____ 19. _____ 20. _____ 21. _____

**INTERIOR**

- |                                |                                  |                                |                                |                          |                          |
|--------------------------------|----------------------------------|--------------------------------|--------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> CLEAN | <input type="checkbox"/> AVERAGE | <input type="checkbox"/> DIRTY |                                |                          |                          |
|                                | Good                             | Worn                           | Burns                          | Rips                     | Stain                    |
| Front Carpet                   | <input type="checkbox"/>         | <input type="checkbox"/>       | <input type="checkbox"/>       | <input type="checkbox"/> | <input type="checkbox"/> |
| Rear Carpet                    | <input type="checkbox"/>         | <input type="checkbox"/>       | <input type="checkbox"/>       | <input type="checkbox"/> | <input type="checkbox"/> |
| Front Seat                     | <input type="checkbox"/>         | <input type="checkbox"/>       | <input type="checkbox"/>       | <input type="checkbox"/> | <input type="checkbox"/> |
| Rear Seat                      | <input type="checkbox"/>         | <input type="checkbox"/>       | <input type="checkbox"/>       | <input type="checkbox"/> | <input type="checkbox"/> |
| Headliner                      | <input type="checkbox"/>         | <input type="checkbox"/>       | <input type="checkbox"/>       | <input type="checkbox"/> | <input type="checkbox"/> |
| Door Panels                    | <input type="checkbox"/>         | <input type="checkbox"/>       | <input type="checkbox"/>       | <input type="checkbox"/> | <input type="checkbox"/> |
| Dash                           | <input type="checkbox"/> Dent    | <input type="checkbox"/> Crack | <input type="checkbox"/> Holes |                          |                          |

**MECHANICAL**

- |                   |                                      |  |  |
|-------------------|--------------------------------------|--|--|
| Engine            | <input type="checkbox"/> Smooth      | <input type="checkbox"/> Rough             | <input type="checkbox"/> Knock                               |
| Trans / Clutch    | <input type="checkbox"/> Seems OK    | <input type="checkbox"/> Slips             |  |
| Air               | <input type="checkbox"/> Blows Hot   |  |  |
| Brakes            | <input type="checkbox"/> Seems OK    | <input type="checkbox"/> Difficult         |  |
| Exhaust           | <input type="checkbox"/> Seems OK    | <input type="checkbox"/> Needs Replacement |  |
| Power Malfunction | <input type="checkbox"/> Windows     | <input type="checkbox"/> Seats             | <input type="checkbox"/> Locks <input type="checkbox"/> Roof |
| Sound Equip.      | <input type="checkbox"/> Inoperative |  |  |

Tires	Right Front	Left Front	Right Rear	Left Rear	Spare
Good					<input type="checkbox"/> Missing
Fair					<input type="checkbox"/> Included
Poor					

The above vehicle has been delivered in the condition described.

Completed by \_\_\_\_\_ Date \_\_\_\_\_