

**VEHICLE INSPECTION REPORT**

Producer. \_\_\_\_\_

Applicant Name. \_\_\_\_\_

Vehicle (Year, Make, Model) \_\_\_\_\_

Serial Number (VIN) \_\_\_\_\_

Color \_\_\_\_\_ Mileage \_\_\_\_\_ # Doors \_\_\_\_\_

**SELECT ANSWER THAT APPLIES**

T-Tops:[Y][N] Convertible:[Y][N] Turbo:[Y][N] Roof: *Normal? Moon? Sun? Manual?*

*Electric? Vehicle Alarm? (attach affidavit for discount). Parking: Street? Off street?*

*Garage?*

[4] [6] [8] Cylinder? Radio: *AM/FM Stereo? Cassette? CD?* Optional equipment and

special packages: *Factory installed or dealer installed factory equipment.*

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

Vehicle has been inspected and is in excellent condition. [Y] [N].

Vehicle has been inspected and damage has been found as described:

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

Signature of Inspector

Date