



Item# _____ Company From: _____
Lot# _____ IRAY Emp _____
Date _____

Vehicles # of Pics: _____

Year: _____ Make: _____ Model: _____
(Turbo Y / N - Supercharged? Y / N)

Door: 2 / 4

VIN#: _____

Miles: _____

Eng Size: _____

Fuel Type: Gas / Diesel

Trans Type: Auto: Y / N Manual: Y / N #of Speed: _____

Wheel Drive: 2 / 4 / All Traction Control: Y / N

Options: AM/FM, Cass, CD, Pwr: Windows, Locks, Mirrors, Air, Tilt, Cruise,
Heated Seats, Traction Control, Suspension Lift, Rollbar, Sunroof. Sliding Glass Window,
Rear Heat, Rear DVD Player, (Vans only: Power Side Door)

Tire Size: _____

Overall Condition: _____

Title: Y / N Salvage: Y / N Lien Card? _____

State: _____ Plate# _____ EXP: ___ / ___

Work Done to Unit: _____

Paperwork: Y / N

Owners Report: _____

Starting Tricks? _____

Misc items Location: _____

Fuel lvl: ___ Oil lvl: ___ A/F lvl: ___ Auto Trans lvl: _____

Notes: (paint, wash, vacuum, shine int, shine tires, etc?)