

VEHICLE INSPECTION FIELD NOTES

Job # _____ File # _____ Date of Occurrence _____
 Insured _____ Date of Assignment _____
 Address (City, State) _____ Date of Receipt _____
 Loss Location _____ Date of Inspection _____
 _____ Insp Location _____
 Stolen? Yes No Recovered by _____ Time of Inspection _____
 Police Report _____ Fire Report _____
 # of Keys _____ Alarm System? Yes No Alarm Type _____
 Hidden Keys? Yes No Location _____

VEHICLE

Make _____ Model _____ Year _____
 VIN _____ Odometer _____

EXTERIOR

Tires	Tire Type	Wheel Type	Tire Tread Depth	Lugs	Missing
LF	_____	_____	_____	_____	_____
LR	_____	_____	_____	_____	_____
RR	_____	_____	_____	_____	_____
RF	_____	_____	_____	_____	_____
SP	_____	_____	_____	_____	_____

Doors	Glass Y/N	Window UP/DOWN	Locked Y/N	Open/Closed	Prior Damage
LF	_____	_____	_____	_____	_____
LR	_____	_____	_____	_____	_____
RR	_____	_____	_____	_____	_____
RF	_____	_____	_____	_____	_____

Body Panels	Construction	Condition	Prior Damage
F Bumper	_____	_____	_____
Grill	_____	_____	_____
LF Fender	_____	_____	_____
LR Quarter	_____	_____	_____
R Bumper	_____	_____	_____
RR Quarter	_____	_____	_____
RF Fender	_____	_____	_____
Hood	_____	_____	_____
Roof	_____	_____	_____
Trunk	_____	_____	_____

UNDER HOOD	Intact	Missing	Parts Missing	Condition
Engine	_____	_____	_____	_____
Battery	_____	_____	_____	_____
Belts & Hoses	_____	_____	_____	_____
Wiring	_____	_____	_____	_____
Accessories	_____	_____	_____	_____

FLUIDS	Level	Condition	Sample Taken
Oil	_____	_____	_____
Transmission	_____	_____	_____
Radiator	_____	_____	_____
Pwr Steer	_____	_____	_____
Brake	_____	_____	_____
Clutch	_____	_____	_____

VEHICLE INSPECTION FIELD NOTES (Continued)

Job # _____

INTERIOR	Intact	Missing	Parts Missing	Condition
Dash Pod	_____	_____	_____	_____
Glove Box	_____	_____	_____	_____
Strg Column	_____	_____	_____	_____
Ignition	_____	_____	_____	_____
Front Seat	_____	_____	_____	_____
Rear Seat	_____	_____	_____	_____
Rear Deck	_____	_____	_____	_____
			Make/Model	
Stereo	_____	_____	_____	_____
Speakers	_____	_____	_____	_____
Accessories	_____	_____	_____	_____
FLOOR			Sample Taken	
LF	_____	_____	_____	_____
LR	_____	_____	_____	_____
RR	_____	_____	_____	_____
RL	_____	_____	_____	_____

PERSONAL EFFECTS IN THE INTERIOR

TRUNK OR CARGO AREA

AFTERMARKET ITEMS NOT PREVIOUSLY DESCRIBED



