

CHECKLIST FOR VEHICLES TO BE SOLD

THE VEHICLE DESCRIBED BELOW IS TO BE GROUNDED IN PREPARATION FOR SALE

License #A _____ Model Year _____ Model Name _____

VIN # _____ Odometer Reading _____

Vehicle Service Location _____

Date _____ (Vehicle is not to be driven or modified after this date.)

VEHICLE TYPE

2 x 4 pickup	<input type="checkbox"/>	2-door sedan	<input type="checkbox"/>	mini-van	<input type="checkbox"/>	SUV	<input type="checkbox"/>
4 x 4 pickup	<input type="checkbox"/>	4-door sedan	<input type="checkbox"/>	van	<input type="checkbox"/>	other	<input type="checkbox"/>

VEHICLE CONDITION

Broken glass or lights Yes No
If yes, specify _____

Accident damage Yes No
If yes, specify _____

Body deterioration; surface rust/peeling paint Yes No
If yes, specify _____

Major rust (holes) Yes No
If yes, specify location _____

General mechanical condition Good
Fair
Poor
Inoperable
If inoperable, specify _____

Is vehicle equipped with a reusable tool box Yes No

Is vehicle equipped with a reusable bed cover Yes No

Location and address where vehicle may be inspected _____

CERTIFICATION

I certify that, to the best of my knowledge, the above information is correct. The decals and license plates have been removed and properly disposed of and, if applicable, the tool box and/or bed cover have been removed. The vehicle credit card is attached.

VEHICLE CUSTODIAN _____ / _____ / _____
SIGNATURE DATE TELEPHONE

CONCURRED IN _____ / _____
SIGNATURE OF ASTC-FO or PROPERTY MGMT OFFICER DATE