

# SAXON FLEET SERVICES

## USED VEHICLE CONDITION REPORT

7571 9th St. N. • Oakdale, MN 55128 • Office (651) 222-7321 • Fax (651) 222-1998

Company/ Name: \_\_\_\_\_ Attention: \_\_\_\_\_

**INCLUDE A COPY OF YOUR TITLE OR REGISTRATION WHEN SUBMITTING THIS FORM**

Year	Make	Model	Trim	Body	Serial Number (VIN)	License Plate
Exterior Color		Interior		Engine		Transmission
		<input type="checkbox"/> Cloth <input type="checkbox"/> Leather <input type="checkbox"/> Vinyl		<input type="checkbox"/> 8cyl <input type="checkbox"/> 6cyl <input type="checkbox"/> 4 cyl <input type="checkbox"/> Diesel		<input type="checkbox"/> Automatic <input type="checkbox"/> Manual
Air Conditioner		Radio		Equipment		
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Dual Zone Climate		<input type="checkbox"/> AM/FM <input type="checkbox"/> CD <input type="checkbox"/> Bluetooth <input type="checkbox"/> Navigation		<input type="checkbox"/> P. Windows <input type="checkbox"/> Tow Package <input type="checkbox"/> Sunroof <input type="checkbox"/> Cruise <input type="checkbox"/> P. Locks <input type="checkbox"/> P. Seat <input type="checkbox"/> Tilt		
Present Mileage _____				Estimate the number of miles this vehicle will be driven in the next 30 Days _____		
<input type="checkbox"/> Actual <input type="checkbox"/> Over 100,000 <input type="checkbox"/> Unknown				How many miles do you drive it in a month?		

**BODY CONDITION > Describe Dents, Creases, Rust, Condition of Paint**

Front/Hood \_\_\_\_\_  
 Left Side \_\_\_\_\_  
 Rear \_\_\_\_\_  
 Right Side \_\_\_\_\_  
 Roof \_\_\_\_\_  
 Bumpers/Wheel Covers \_\_\_\_\_  
 Mldgs/Grill/Tailgate \_\_\_\_\_

**WINDSHIELD**  OK  Cracked  Chipped  Scratched – Where? \_\_\_\_\_

Other Glass \_\_\_\_\_

**TIRES** (Good, Fair, Poor) L. Frt. \_\_\_\_\_ R. Frt. \_\_\_\_\_ L. Rear \_\_\_\_\_ R. Rear \_\_\_\_\_ Spare \_\_\_\_\_

**INTERIOR CONDITION ( Worn, Torn, Stained, Soiled, Burn Holes)**

Front Seat \_\_\_\_\_ Rear Seat \_\_\_\_\_  
 Headliner \_\_\_\_\_ Carpets \_\_\_\_\_  
 Trunk/Cargo Area \_\_\_\_\_ Other \_\_\_\_\_

**MECHANICAL CONDITION**

Engine \_\_\_\_\_ Transmission \_\_\_\_\_  
 Drivetrain \_\_\_\_\_ Brakes \_\_\_\_\_  
 Front End \_\_\_\_\_ Exhaust System \_\_\_\_\_  
 Air Conditioner \_\_\_\_\_ Other \_\_\_\_\_

**ANY MISREPRESENTATION OF THE ACTUAL VEHICLE CONDITION ON THIS FORM VOIDS THE APPRAISED TRADE VALUE OFFERED BY SAXON FLEET SERVICES. IN THE EVENT OF A CHANGE IN CONDITION, THE OWNER AGREES TO IMMEDIATELY NOTIFY SAXON FLEET SERVICES FOR RE-EVALUATION. CUSTOMER SHALL INDEMNIFY SAXON FLEET SERVICES FOR ANY MISREPRESENTATION OF THE ACTUAL VEHICLE CONDITION.**

Authorized Signature	Title	Print Name	Date
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