

# ASSET INSPECTION FORM

## REPORT



NEW APPLICATIONS:  
credit@anglefinance.com.au

ALL OTHER ENQUIRIES:  
info@anglefinance.com.au

Level 9, 360 Collins St, Melbourne, Vic 3000

### INSPECTION DETAILS (mandatory)

Date of inspection	Time of inspection	Inspector's name	Inspector's company
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Vendor's name	Vendor's contact number	Vendor's ID verified (drivers licence or passport)	If NO please provide a reason
<input type="text"/>	<input type="text"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="text"/>

Inspection location

### Vehicle / Primary ASSET DETAILS (mandatory)

Year / Make / Model / Trans / Turnkey / Rego / Rego Exp / VIN # / Engine # / Odo / Hours

### Secondary / Tertiary ASSET DETAILS (mandatory)

Year / Make / Model / Serial # / Hours / Rego / Rego Exp / Other Identifiers

### Further comments

### PHOTOS TAKEN At time of inspection

(Please tick for the relevant fields)

RegistrationPlate	<input type="checkbox"/>	Right Side	<input type="checkbox"/>	Serial Number	<input type="checkbox"/>	Vendor Bank details	<input type="checkbox"/>
VIN plate	<input type="checkbox"/>	Left Side	<input type="checkbox"/>	Hours	<input type="checkbox"/>	Rego Exp	<input type="checkbox"/>
Engine number	<input type="checkbox"/>	Interiors	<input type="checkbox"/>	Rear Side	<input type="checkbox"/>		
Odo	<input type="checkbox"/>	Front Side	<input type="checkbox"/>	Rego Papers	<input type="checkbox"/>		

### Asset CONDITION

( 1 - Excellent , 2 - Good, 3 - Average, 4 - Poor )

I, ..... of ..... (firm) declare that I have sighted the vehicle/asset described above and the details set out in this report are accurate. I further confirm I am authorized to conduct this inspection on behalf of the Company named above

Inspector to sign

Date