



INSPECTION DATE

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TOTAL LOSS YES <input type="checkbox"/> NO <input type="checkbox"/>		BORDERLINE <input type="checkbox"/> YES	TOWING	STORAGE PER DAY	DAY SINCE
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INSPECTION LOCATION	<input type="checkbox"/>	BUSINESS	<input type="checkbox"/>	RESIDENCE	<input type="checkbox"/>	SHOP	<input type="checkbox"/>	OTHER
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OLD DAMAGE	TOTAL OLD DAMAGE
	\$

RETAIL BOOK VALUE			OVERALL CONDITION (PRIOR TO LOSS)		
RETAIL BASE			<input type="checkbox"/> GOOD	<input type="checkbox"/> FAIR	<input type="checkbox"/> POOR
Mileage <input type="checkbox"/> High <input type="checkbox"/> Low					
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NET TOTAL \$			TOTAL LOSS BASIS		
			<div><input type="checkbox"/> ADP<input type="checkbox"/> CCC<input type="checkbox"/> Mitchell<input type="checkbox"/> Other</div>		
			Request Number:		
			RETAIL MARKET VALUE \$		
			LESS: OLD DAMAGE		
			ACTUAL CASH VALUE \$		
			SALES TAX @ %		
			SETTLEMENT VALUE \$		
			VEHICLE DRIVEABLE <input type="checkbox"/> YES <input type="checkbox"/> NO		
OFFICIAL GUIDE	EDITION DATE	LICENSE EXP.			

SALVAGE BIDS			SALVAGE POOL	
BUYER	PHONE #	BID	BUYER	
1		\$		
2		\$	STALL NUMBER	
3		\$	PERMISSION <input type="checkbox"/> YES <input type="checkbox"/> NO	

APPRAISER'S COMMENTS:	
APPRAISER	