



APPRAISER'S REPORT

INDEX NUMBER	
CLAIM NUMBER	
VEHICLE OWNER	
INSPECTION DATE	

TOTAL LOSS YES <input type="checkbox"/> NO <input type="checkbox"/>	BORDERLINE <input type="checkbox"/> YES	TOWING	STORAGE PER DAY	DAY SINCE
LKQ AVAILABLE YES <input type="checkbox"/> NO <input type="checkbox"/>	1.		2.	
AFTERMARKET AVAILABLE YES <input type="checkbox"/> NO <input type="checkbox"/>	1.		2.	
RECONDITIONED AVAILABLE YES <input type="checkbox"/> NO <input type="checkbox"/>	1.		2.	

OLD DAMAGE	TOTAL OLD DAMAGE \$
SUGGESTED BETTERMENT	TOTAL BETTERMENT \$

INSPECTION LOCATION ADDRESS <input type="checkbox"/> BUSINESS <input type="checkbox"/> RESIDENCE <input type="checkbox"/> SHOP <input type="checkbox"/> OTHER	OVERALL CONDITION (PRIOR TO LOSS) <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR
This Repair Cost Reflects % of the Retail NADA Book Value	

RETAIL BOOK VALUE RETAIL BASE \$ _____ Mileage <input type="checkbox"/> High <input type="checkbox"/> Low _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ NET TOTAL \$ _____	REPAIR COST ESTIMATED REPAIR COST \$ _____ BETTERMENT _____ DEDUCTIBLE _____ TOTAL DEDUCTIONS _____ EST. DOWNTIME (Subject to Parts Availability) DAYS _____ NET AMOUNT \$ _____
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OFFICIAL GUIDE	EDITION DATE	VEHICLE DRIVEABLE <input type="checkbox"/> YES <input type="checkbox"/> NO
		SHOP OF OWNERS CHOICE <input type="checkbox"/> YES <input type="checkbox"/> NO
APPRAISER'S COMMENTS:		SHOP COPY SENT <input type="checkbox"/> SHOP COPY RETAINED <input type="checkbox"/>
		OWNER COPY SENT <input type="checkbox"/> OWNER COPY RETAINED <input type="checkbox"/>

APPRAISER	
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