

# TRADE-IN EVALUATION

Date \_\_\_\_\_

## Customer Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

## Vehicle Description

Year \_\_\_\_\_ Make \_\_\_\_\_

Model \_\_\_\_\_ Body \_\_\_\_\_

Color \_\_\_\_\_ Mileage \_\_\_\_\_

V I N \_\_\_\_\_

One Owner	Buckets:	Traction Assist:	Running Boards:
Non Smoker	Cap't Chairs:	4 Wheel Disc.	Tonneau Cover
Air:      Auto Temp:	Leather:      Color:	Engine:      Litre:	Bed Liner:      Drop In/Spray
Pwr. Wind:	Cloth      Color:	OHC:	Entertainment DVDNID
Pwr. Seat:      Dual:	Pwr. Moonroof:	Trans:      Man:	3rd Row Seat
Tilt Whl:	Prem. Sound:	Alloy Wheels	Adj. Pedals
Dr. Locks	Radio:      C/D:	Privacy Glass	Rear Air
Cruise	Mirrors:      Power:	Sliding R. Window:	Tow Pkg.
60/40 Seat:	Keyless Entry/Remote Pads	Auto Lamp On/Off Delay:	Nay. System
50/50 Seat:	Anti Lock Brakes:	Anti-Theft System	

## Information Needed for Evaluation of Vehicle

Did you buy this vehicle brand-new? ..... ☐ Yes ☐ No

If no, how long ago? \_\_\_\_\_

Has this vehicle been paint & corrosion protected? ..... ☐ Yes ☐ No

Does the vehicle have an extended warranty? ..... ☐ Yes ☐ No

Has the vehicle had any paint or body work? ..... ☐ Yes ☐ No

If yes, explain \_\_\_\_\_ Signature: \_\_\_\_\_

## TOP MARKET VALUE OF VEHICLE:

\*\*\*\*\* INTERNAL USE ONLY \*\*\*\*\*

Items needed and cost to prepare for resale: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Salesman

\_\_\_\_\_