

ORIGIN Vehicle Condition Report

Owner Name _____

Tel: _____

Origin Pick up location: _____

Customer/Dealer Name _____

Tel: _____

Delivery location: _____

Vehicle Make: _____

Model: _____

Year: _____ Colour: _____

VIN: _____

License: _____

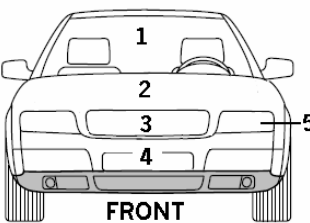
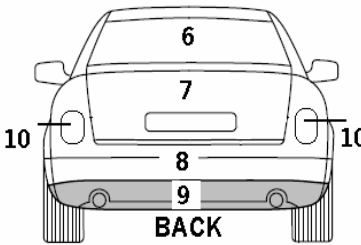
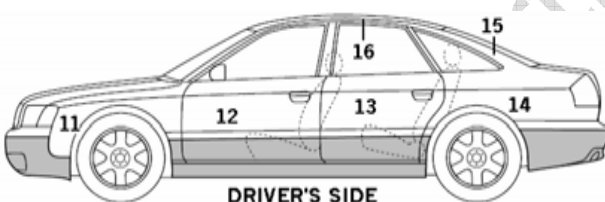
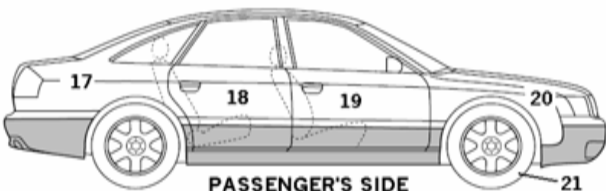
Odometer Reading: _____ miles/km

CHECK OPTIONS INCLUDED ON VEHICLE					
ABS 4 Wheel	Sport Wheels	Cruise Control	Moon / Sun Roof	Power Windows	Bedliner
Air Cond.	GPS	Custom Bumper	Power Door Locks	Roof Rack	Custom stereo
C.D.	Leather Interior	Power Seats	Running Boards	Wide Tires	Tow pkg
Manual Trans.	Custom rims.	Luxury/Sport Pkg.	Power Steering	Rear Sldg Window	
Other: _____					

CONDITION OF VEHICLE

Indicate any damage to the vehicle in the space provided using your own words or the following legend. **If None write None**

Bent – B Broken – BR Chip – CH Cracked– CR Dented – D Missing – M
 Pitted – PT Rusty – R Rubbed – RU Scratch – S Hairline Scratch - HS Stained – ST Torn – T

 <p>FRONT</p>	1.	 <p>BACK</p>	6.				
	2.		7.				
	3.		8.				
	4.		9.				
	5.		10.				
 <p>DRIVER'S SIDE</p>	 <p>PASSENGER'S SIDE</p>	11.	12.	13.	17.	18.	19.
		14.	15.	16.	20.	21.	

INTERIOR

Worn- W Burns – B Ripped – R Stain – S Cracked – C

Front Carpet _____

Rear Carpet _____

Front Seat _____

Rear Seat _____

Headliner _____

Door Panels _____

FUNCTION & TIRES

Operational Yes No Difficulty starting Yes No

Tires & Rims,	Front R	Front L	Rear R	Rear L	Spare
S – scratched D – dented W – worn C – cut R – rubbed					

I verify that this is an accurate assessment of this vehicle upon collection.

NAME _____ Representing: (buyer, seller, carrier, agent, dealer) ; _____

SIGNATURE: _____ Date: _____

RETAIN THIS COPY FOR COMPARISON TO DESTINATION CONDITION REPORT

DESTINATION Vehicle Condition Report

Owner Name _____
 Tel: _____
 Origin Pick up location: _____

Vehicle Make: _____
 Model: _____
 Year: _____ Colour: _____

Customer/Dealer Name _____
 Tel: _____
 Delivery location: _____

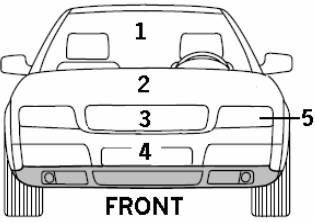
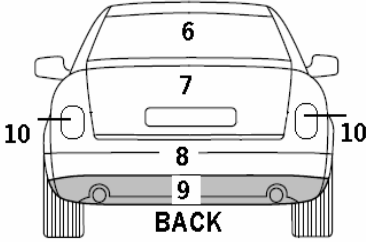
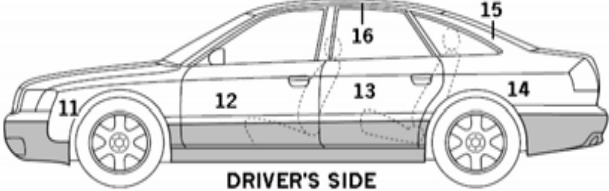
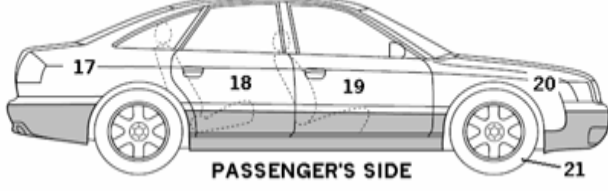
VIN: _____
 License: _____
 Odometer Reading: _____ miles/km

CHECK OPTIONS INCLUDED ON VEHICLE					
ABS 4 Wheel	Sport Wheels	Cruise Control	Moon / Sun Roof	Power Windows	Bedliner
Air Cond.	GPS	Custom Bumper	Power Door Locks	Roof Rack	Custom stereo
C.D.	Leather Interior	Power Seats	Running Boards	Wide Tires	Tow pkg
Manual Trans.	Custom rims.	Luxury/Sport Pkg.	Power Steering	Rear Sldg Window	
Other: _____					

CONDITION OF VEHICLE

Indicate any damage to the vehicle in the space provided using your own words or the following legend. **If None write None**

Bent – B Broken – BR Chip – CH Cracked – CR Dented – D Missing – M
 Pitted – PT Rusty – R Rubbed – RU Scratched – S Hairline Scratch - HS Stained – ST Torn – T

 <p style="text-align: center;">FRONT</p>	1.	 <p style="text-align: center;">BACK</p>	6.				
	2.		7.				
	3.		8.				
	4.		9.				
	5.		10.				
 <p style="text-align: center;">DRIVER'S SIDE</p>	 <p style="text-align: center;">PASSENGER'S SIDE</p>	11.	12.	13.	17.	18.	19.
		14.	15.	16.	20.	21.	

INTERIOR

Worn- W Burns – B Ripped – R Stain – S Cracked – C

Front Carpet _____
 Rear Carpet _____
 Front Seat _____
 Rear Seat _____
 Headliner _____
 Door Panels _____

FUNCTION & TIRES

Vehicle Operational?	Yes	No	Difficulty starting?		
			Yes	No	
Tires & Rims	Front R	Front L	Rear R	Rear L	Spare
S – scratched					
D – dented					
W – worn C – cut					
R – rubbed					

I verify that this is an accurate assessment of this vehicle upon delivery

NAME _____

Representing: (owner, carrier, agent, dealer; _____)

SIGNATURE: _____

Date: _____

RETAIN THIS COPY FOR COMPARISON TO ORIGIN CONDITION REPORT