

MIDLANT BSVE MOTOR VEHICLE DESCRIPTION AND VEHICLE CHECKLIST

NOTE: Please fill in requested information as completely as possible. Place an (X) in the correct feature/description. MANDATORY fields are indicated by (*) asterisks.

Vehicle Tag _____ Location/Site * NNSY
 IO# * 22319 EC * 0313-02 Leased/Owned/Non Owned * Owned
 Odometer Reading * 23789 Hours _____ Acquisition Cost * _____
 Manufacturer * Ford Model * F-150
 Year Mfg. * 2006 VIN * 1FTPFA2V56NB74198
 Pass Cap _____ Trans (Man/Auto) Auto # Doors 2
 Color (Ext */Int) Blue / Tan Fuel Type * ESS Fuel Cap _____ Cylinders 8
 #Axles _____ Pickup Bed (narrow/wide) _____ Bed Length _____ GVWR * 7,050
 Body Style/Description _____
 Installation Date _____ Acquisition Date * 6/8/06 In-Service Date * 6/8/06
 Purchase Price: _____ Warranty Expiration Date/Miles: _____ / _____
 Warranty Expiration Date/Miles: _____ / _____ MSA Yes No
 Owning Activity * NAV FAC UIC N4008500
 Activity POC Math Noblick POC Work Phone ONLY 396-4446
 Secondary POC Warren Sims POC Purchase Price: 396-3076
 GSA Agency Owned Long Term Commercial Lease Short Term Rental
 Operational Status: Oper Decom Pend Other : _____
 Exemption ID * None Location Code * 40 Location Zip * 23709 WC WAMP70

Vehicle Specifications:

Purchase Contract Number:	RPN:
Engine Type: <u>5.4L Triton</u>	Engine Serial Number:
Number of Cylinders: <u>6</u>	Engine Size: <u>5.4L</u>
Battery Size (amp): <u>850</u>	Transmission Type: <u>Auto</u>
Auxiliary Engine Type:	Aux. Eng. Serial Number:
Aux. Eng. Power:	Aux. Eng. Cylinders:
Tire Size, Front: <u>P235/70R17</u>	Tire Size, Rear: <u>P235/70R17</u>
Ignition Code:	Lease Contract Number:

Please check/list any special features and accessories:

<input type="checkbox"/> 4x4	<input type="checkbox"/> AWD	<input type="checkbox"/> Dual Wheels	<input type="checkbox"/> Power Locks
<input type="checkbox"/> 4x6	<input checked="" type="checkbox"/> Extended Cab	<input checked="" type="checkbox"/> Towing Package	<input type="checkbox"/> Power Windows
<input type="checkbox"/> 6x6	<input type="checkbox"/> Crew Cab	<input type="checkbox"/> Utility Body	<input type="checkbox"/> Tire Chains

Please check/describe vehicle condition:

<input type="checkbox"/> A/C Inoperable	<input type="checkbox"/> Electrical Problems	<input type="checkbox"/> Headlights Inoperable	<input type="checkbox"/> Starter Bad-Won't Start
<input type="checkbox"/> Battery(s) Dead/Missing	<input type="checkbox"/> Exhaust System Problem	<input type="checkbox"/> Keys Missing	<input type="checkbox"/> Speedometer Inoperable
<input type="checkbox"/> Body Damage, Rust	<input type="checkbox"/> Fire Damage	<input type="checkbox"/> Parking Lights Inoperable	<input type="checkbox"/> Suspension Problems
<input type="checkbox"/> Brakes Worn	<input type="checkbox"/> Flood Damage	<input type="checkbox"/> Mechanical Problems	<input type="checkbox"/> Transmission Leak
<input checked="" type="checkbox"/> Dents, Minor	<input type="checkbox"/> Fuel Gauge Inoperable	<input checked="" type="checkbox"/> Minor Scratches	<input type="checkbox"/> Trans. Repairs Req.
<input type="checkbox"/> Engine Part(s) Required	<input type="checkbox"/> Interior Damaged	<input type="checkbox"/> Odometer Inoperable	<input type="checkbox"/> Visual Blemishes
<input type="checkbox"/> Engine Repairs Req.	<input type="checkbox"/> Hazard Lights Inoperable	<input type="checkbox"/> Oil Leaks	<input type="checkbox"/> Windshield Cracked
<input type="checkbox"/> Engine Smoke	<input type="checkbox"/> Horn Inoperable	<input type="checkbox"/> Radiator Leak	<input type="checkbox"/> Wipers Inoperable
<input type="checkbox"/> Axel Damage	<input type="checkbox"/> Frame Damage	<input type="checkbox"/> Tires(condition)	

Please Check Appropriate Condition Code:

- Code 1 = Excellent Code S = Scrap (Major mechanical or accidents repairs required.)
 Code 4 = Usable Code X = Salvage (Not to be "Titled" for highway use.)
 Code 7 = Repairable (Mechanical and/or accident repairs required)

Data Recorded By: [Signature] Date: 22 Aug 16