

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

MIDLANT BSVE MOTOR VEHICLE DESCRIPTION AND VEHICLE CHECKLIST

Vehicle Tag * N9474237 **Location/Site** : NORFOLK
IO# * _____ **EC** * 0329-01 **Leased/Owned/Non Owned** * _____
Odometer Reading * 34139 **Hours** _____ **Acquisition Cost** * _____
Manufacturer * FORD **Model** * E350
Year Mfg. * 2006 **VIN** * 1FTSS34L26HA42270
Pass Cap _____ **Trans (Man/Auto)** AUTO **# Doors** 6
Color (Ext */Int) YELLOW **Fuel Type** * GAS DE **Fuel Cap** _____ **Cylinders** 8
#Axles 2 **Pickup Bed (narrow/wide)** W **Bed Length** 10 FT **GVWR** * 9400
Body Style/Description TRUCK PANEL VAN 4X2 6001-8500 GVWR
Installation Date _____ **Acquisition Date** * _____ **In-Service Date** * _____
Purchase Price: _____ **Warranty Expiration Date/Miles:** _____ / _____
Warranty Expiration Date/Miles: _____ / _____ **MSA** Yes No
Owning Activity * _____ **UIC** _____
Activity POC _____ **POC Work Phone ONLY** _____
Secondary POC _____ **POC Purchase Price:** _____
 GSA Agency Owned Long Term Commercial Lease Short Term Rental
Operational Status: Oper Decom Pend Other : _____
Exemption ID * _____ **Location Code** * _____ **Location Zip** * _____ **WC** _____

Vehicle Specifications:

Purchase Contract Number:	RPN:
Engine Type: <u>V-8</u>	Engine Serial Number:
Number of Cylinders:	Engine Size: <u>5.4 ECODLINE</u>
Battery Size (amp):	Transmission Type:
Auxiliary Engine Type:	Aux. Eng. Serial Number:
Aux. Eng. Power:	Aux. Eng. Cylinders:
Tire Size, Front:	Tire Size, Rear:
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 type="checkbox"/> Extended Cab	<input 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 checked="" 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: TYRONE MILES Date: 10-6-16