

# AUTOMOBILE INSPECTION REPORT

(Attach Photos Here)

NOTE: Area for explanation where lack of clarity of VIN number not located is at bottom of form.

## INSURED INFORMATION

Name \_\_\_\_\_ Policy/Reference # \_\_\_\_\_  
(Last, First, Initial)  
Address \_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City, State, Zip) Insurer **COMMERCE WEST INSURANCE COMPANY**

## VEHICLE INFORMATION

License Plate No. \_\_\_\_\_ State \_\_\_\_\_ Year/Make \_\_\_\_\_ / \_\_\_\_\_ Model \_\_\_\_\_  
Body Style 2D \_\_\_\_\_ 4D \_\_\_\_\_ St. W \_\_\_\_\_ Van \_\_\_\_\_ MiniVan \_\_\_\_\_ Truck \_\_\_\_\_ Convtrbl \_\_\_\_\_ Htchbk \_\_\_\_\_ Mtrcycl \_\_\_\_\_ Other \_\_\_\_\_  
Mileage \_\_\_\_\_ Vehicle ID No. \_\_\_\_\_ Color \_\_\_\_\_

### RECORD ANY VISIBLE EXISTING DAMAGE TO ANY OF THE FOLLOWING AREAS OF THE AUTOMOBILE. CHECK THE BOX IF THERE IS DAMAGE OR RUST.

- |                                |                                |                             |
|--------------------------------|--------------------------------|-----------------------------|
| 1. Front Bumper..... ( )       | 9. Rt Rear Qtr Panel ..... ( ) | 17. Lft Rear Glass..... ( ) |
| 2. Grill..... ( )              | 10. Rt Rear Door..... ( )      | 18. Rear Glass..... ( )     |
| 3. Lft Front Fender..... ( )   | 11. Rt Front Door..... ( )     | 19. Rt Rear Glass..... ( )  |
| 4. Lft Front Door..... ( )     | 12. Rt Front Fender..... ( )   | 20. Rt Front Glass..... ( ) |
| 5. Lft Rear Door..... ( )      | 13. Hood..... ( )              | 21. Seats..... ( )          |
| 6. Lft Rear Qtr Panel..... ( ) | 14. Roof..... ( )              | 22. Center Console..... ( ) |
| 7. Rear Bumper..... ( )        | 15. Windshield..... ( )        | 23. Floor Covering..... ( ) |
| 8. Trunk/Rear Door..... ( )    | 16. Lft Front Glass..... ( )   | 24. Dash Board..... ( )     |

### THIS MUST BE FULLY COMPLETED FOR FACTORY OPTIONS & NON-FACTORY EQUIPMENT INDICATE THE PRESENCE OF ANY OF THE FOLLOWING EQUIPMENT OR ACCESSORIES:

- | Factory Non-Factory                 |  | Factory Non-Factory                |  | Factory Non-Factory               |  |
|-------------------------------------|--|------------------------------------|--|-----------------------------------|--|
| 1. Air Conditioning..... ( ) ( )    |  | 9. Power Steering..... ( ) ( )     |  | 17. Air Bag(s)..... ( ) ( )       |  |
| 2. Tilt Wheel..... ( ) ( )          |  | 10. Power Brakes..... ( ) ( )      |  | 18. Automobile Trans..... ( ) ( ) |  |
| 3. Power Antenna..... ( ) ( )       |  | 11. Vinyl Top..... ( ) ( )         |  | 19. Manual Trans..... ( ) ( )     |  |
| 4. Power Trunk ..... ( ) ( )        |  | 12. Mounted Brake Lights.. ( ) ( ) |  | 20. Rear Window Def..... ( ) ( )  |  |
| 5. Digital Instruments..... ( ) ( ) |  | 13. Cruise Control..... ( ) ( )    |  | 21. Rear Wiper..... ( ) ( )       |  |
| 6. Anti-Theft Systems..... ( ) ( )  |  | 14. Tape Deck..... ( ) ( )         |  | 22. Radar Detector..... ( ) ( )   |  |
| 7. Compact Disc Player.... ( ) ( )  |  | 15. CB Radio..... ( ) ( )          |  | 23. Telephone..... ( ) ( )        |  |
| 8. Radio/Stereo..... ( ) ( )        |  | 16. Custom Wheels/Tires.. ( ) ( )  |  | 24. Other..... ( ) ( )            |  |

Enter Make and Model, Where Applicable \_\_\_\_\_

Describe Other Accessories \_\_\_\_\_  
NOTE: The insured may, at his/her discretion, attach copies of receipts and/or other evidence showing the make and model of any accessories not factory installed.

**THE ABOVE IS A TRUE STATEMENT RECORDING ANY AND ALL EXISTING DAMAGE, RUST AND/OR MISSING PARTS AS OF THE DATE OF THIS INSPECTION. THE UNDERSIGNED CERTIFIES, UNDER PENALTY OF PERJURY, THAT THIS INSPECTION REPORT IS TRUE AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.**

Inspector Name \_\_\_\_\_ Date \_\_\_\_\_

Inspector Signature \_\_\_\_\_ Time \_\_\_\_\_ AM/PM

Location \_\_\_\_\_

Party Presenting Vehicle for Identification \_\_\_\_\_

Relationship to Insured \_\_\_\_\_ Date \_\_\_\_\_

**I have received a copy of both this automobile inspection report and the COMMERCE WEST INSURANCE COMPANY Preinspection Notice.**

Applicant's signature \_\_\_\_\_ Time \_\_\_\_\_ AM/PM

Photo VIN Explanation \_\_\_\_\_