

# Salvage Vehicle Evaluation Form

Claim Number

Date of Evaluation

Inspector Name

Insurance Company

Contact Phone

## Vehicle Information

Year

Make

Model

VIN

Odometer Reading

License Plate

State

## Damage Assessment

Component/Area	Description of Damage	Repairable (Yes/No)
Front		
Rear		
Left Side		
Right Side		
Roof		
Interior		
Engine/Mech.		
Frame/Chassis		

Other Damage Notes

## Salvage Evaluation

Salvage Type 

Select

Estimated Salvage Value

Storage Location

Towing Charges

Storage Charges

Inspector Notes

Inspector Signature

Date