

## GovDeals Marine-Boat Inspection Form

<b>Inventory ID:</b> _____	<b>Asset Number:</b> _____	<b>Fair Market Value:</b> _____
<b>Short Description:</b> Year _____ Make _____ Model _____		
<b>Long Description:</b> <input type="checkbox"/> Starts & <input type="checkbox"/> Runs <input type="checkbox"/> Needs New Battery to Run <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only  Serial # _____ Trailer Included: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Hour Meter:</b> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> Hour Meter Accurate <input type="checkbox"/> Y <input type="checkbox"/> N: _____  <b>Length:</b> _____ <b>Width:</b> _____ <b>Draft:</b> _____		
<b>Engine Manufacture:</b> _____ <b>Horsepower:</b> _____ <input type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine # of Engines: _____ Engine Serial #'s _____ & _____ Engine Type: <input type="checkbox"/> Inboard <input type="checkbox"/> Outboard & <input type="checkbox"/> 2 Stroke <input type="checkbox"/> 4 Stroke     Engine Model Year if Outboard: _____ Engine Condition: <input type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is Unknown     Fuel Tank Size: _____ Repairs needed: _____ Propeller Material/Condition: _____ Engine Maintained every: _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection <b>Exterior:</b> Hull Material: <input type="checkbox"/> Fiberglass <input type="checkbox"/> Aluminum <input type="checkbox"/> Wood <input type="checkbox"/> Other _____ Minor: <input type="checkbox"/> Dents <input type="checkbox"/> Scratches <input type="checkbox"/> Dings <b>Windows:</b> <input type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked _____ Major Damage to: _____ Additional Damage: _____ Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed <u>or</u> <input type="checkbox"/> Have been Removed & <input type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions Emergency equip: <input type="checkbox"/> None <input type="checkbox"/> Has been removed & <input type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes		
<b>Interior:</b> Color _____ # of Passengers _____ Damage to Seats: _____ Damage to Dash/Floor: _____ Radio: <input type="checkbox"/> Stock <u>or</u> <input type="checkbox"/> Brand & Model: _____		
<b>Trailer:</b> Manufacturer: _____ Serial #/ VIN: _____ Trailer Condition: _____ Road Worthy: <input type="checkbox"/> Y <input type="checkbox"/> N     Type of Hitch: _____ Trailer Capacity: _____		
<b>Additional Equipment:</b> _____ Manufacturer _____ Model _____ Serial # _____		
<b>Location of Asset:</b> _____ <b>For more information contact:</b> _____ <b>Reminder:</b> Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.		