

Year Make Model Color

VIN Odometer

_____ None
_____ Noted Yes Describe, if yes

VISIBLE SAFETY ISSUES
CHASSIS OR STRUCTURAL DAMAGE
NON INDUSTRY-STANDARD REPAIR
UNREPAIRED DAMAGE

CHASSIS INSPECTION None
_____ Noted Yes Location – Details, if yes

Frame/Unibody Repair/Welds
Frame Machine Pinch Marks
Other

BODY PANEL INSPECTION None
_____ Noted Yes Location – Details, if yes

Replaced Body Panels
Damaged/Repaired Body Panels
Uneven Body Panel Gaps
Other

PAINT INSPECTION None
_____ Noted Yes Location – Details, if yes

Difference in Paint Color/Texture
Uneven Paint Thickness
Aftermarket Overspray/Mask-lines
Other

Was motor vehicle placed on a lift to inspect chassis? Yes No
Was a paint mil thickness gauge used to measure paint thickness? Yes No
Good faith estimate whether discovered prior alteration/damage/repair cost exceeds 6 percent of sales

Other Inspection Comments

price: Yes No
Cost of Inspection: \$ _____ Date of Inspection: _____
Inspector Name: _____
Inspector Contact Information: _____

Inspector Signature: _____

PRIOR ALTERATION/DAMAGE/REPAIR INSPECTION IS BASED ON GOOD FAITH OBSERVATION, MINIMAL DISASSEMBLY AND WITHOUT USE OF COMPUTERIZED MEASURING SYSTEM(S). See NMAC 12.2.14.1, et seq. (NOT A WARRANTY.)
[12.2.14.14 NMAC - N, xx/xx/xxxx]