



ORTT - HEAVY TRAILER APPRAISER REPORT

INSURED: _____ CLAIM#: _____ FILE#: _____

OWNER:(Name & Address) _____

DATES: LOSS: _____ ASSIGNMENT: _____ INSPECTION: _____ COMPLETION: _____

YEAR: _____ Prod. Date: _____ FRONT REAR WHEELS: (Type) _____

MAKE: _____ REAR REAR WHEELS: (Type) _____

MODEL: _____ TIRES: (Make & Type) _____

VIN: _____ SIZE: _____ NEW (MATCHED SET)

UNIT#: _____ LICENSE #: _____ STATE: _____

Trailer/Body

Ext. Color _____ # of Axles _____ Length _____ Width _____ Height _____

CONSTRUCTION

- Frame: Steel, Aluminum, Frame less; Sides Roof: Wood, Steel, FRP, Aluminum; Semi: Flatbed, Curtain Side, Enclosed/Dry Van, Refrigerated; Dump: Belly Dump, Side Dump, End Dump, Liner: Plastic /Steel, Air Dump Gate, Heated; Tanker: # of Gallons, Pump Mfg., Water, Food Grade, Fuel; Deck: Wood, Steel, Diamond Plate, Aluminum; Superstructure: Wood, Aluminum, Steel, FRP; Brakes: Surge, Electric, Air; Suspension: Spring, Torsion, Air; Door Types: Curbside, Roadside, Roll-up, Swing

CONDITION RATING: Above Average Average Below Average Repairable Unit Total Loss

ACV\$ _____ Salvage Value\$ _____

INSPECTION DETAILS

APPRAISER: _____ DATE: _____