

Re-Inspection Report

Loss Number:

Date of Re-inspection:

Re-inspector Name:

Location of Inspection (include shop name):

Vehicle Being Re-inspected:

Year:

Make:

Model:

VIN:

Include photographs of the repairs completed to date with this report.

1. Was the appraisal followed? Yes No
 If no, why not?

2. Were the parts specified on the appraisal utilized? Yes No

3. If no, were aftermarket or LKQ parts used, or was the damaged part repaired?

 New Aftermarket LKQ Repaired

 If no, reason for the change?

 If there was a change, was this at the request of the customer? Yes No
 If no, why not?

4. Were quality repairs completed? Yes No

 If there are applicable industry standards, were they met? Yes No
 If no, why not?

5. Was the shop's file checked for receipts/invoices? Yes No

6. If not in the shop file, were invoices for the parts purchased available? Yes No

Comments:

Signature