Large Marine

Valuation Request Form

1.888.475.9975 *Phone*
1.888.475.9935 *Fax*
www.vvsi.com
general@vvsi.com

Office ID Number: _____ Company: _____

Claim Rep Name: _____ Email: _____

Phone / Fax: _____ Calculate Sales Tax: ☐ Car Fax Requested: ☐

License Fee Amount: _____ Deductible: _____

Salvage Value: _____ Salvage Bid Requested: ☐ Claim Ref #: _____

Type Of Loss: _____ Date Of Loss: _____

Owner / Insured: _____ Insured Phone / Contact: _____

City / State / Zip: _____

Appraiser Company: SCA Appraisal Company Appraiser Name: _____

Appraiser Phone / Email: _____ Appraisal Amount: _____ ACV Amount: _____

HIN: _____

Year: _____ Make: _____ Model: _____

Type: Choose One Length: _____ Hull Material _____ Hours _____

Previous Salvage/Branded Title: ☐

Options

Engine / Propulsion		Additional Description		Trailer	
Engine Type	Choose	Seating Capacity		Trailer Make or Not Inc	
Engine Mfr.		Floor Plan		Trailer Axles	
Eng #/HP		Cover	Choose	Trailer Winch	Choose
Propulsion:	Choose One	Cabin	Choose	Power Tongue Jack	☐
Sail Type	None	A/C	☐		
Number Of Sails		Head	☐	*Conditions*	
Electronics		Galley	☐	**Interior**	
Entertainment		Halon	☐	Seats	Choose One
Fish Finder	☐	Ice Chest #/Size		Carpet	Choose One
Depth Finder	☐	Windlass Anchor	☐	**Propulsion**	
Communications	Choose	**Fish and Ski Equipment**		Engine	Choose One
GPS	☐	Live Well	Choose	Sails	Choose One
Radar	☐	Bait Box	Choose	**Exterior**	
Plotter/Auto Pilot	☐	Rod Holders	Choose	Hull	Choose One
Interface	☐	Outriggers		Paint	Choose One
Generator	☐	Ski Tower	☐	Glass	Choose One
Generator KW		Swing Platform	☐	**Trailer**	
Shore Power	☐			Trailer	Choose One

Refurbishments _____ Date/Cost _____ Prior Damage Description _____ Amount _____

Condition Ratings: 1 = Excellent 2 = Above Average 3 = Average 4 = Below Average 5 = Poor PLEASE SEND PHOTOS IF AVAILABLE