

Equipment Condition Report

Lease #: _____

Supplier of Equipment (Complete Address)

Lessee Information (Complete Address)

Phone # _____

Phone # _____

Fax # _____

Equipment Description: (Include Make, Model, Cost Breakdowns and Serial Numbers)

Current dollar Value of Equipment: \$ _____ **Cost new:** \$ _____

Date Manufactured: _____ **Age:** _____ **Size:** _____

Color: _____ **Features:** _____

GVW: _____ **Empty Weight:** _____

List all attachments, accessories, customizing and/or modifications

If reconditioned, explain when and what was done:

Overall Condition/Appearance:

Appraised By:

Company Name: _____

Co. Address/Tele/Fax: _____

Signature of Appraiser: _____

Print Name: _____

Title: _____

Date: _____