

### Commercial Trailer Total Loss

Date Requested:

Autobid Request No	Company Name	Adjuster Name	Adjuster Phone No	Loss Date				
Claim No	File #	Insured Name	Insured Phone No	Loss Type				
Market Area (City/Zip)		Claimant Name	Claimant Phone No					
eMail address		Fax No	Appraiser Name	Appraiser Phone No				
VIN	Year	Make	Model					
Style	<input type="checkbox"/> Aluminum <input type="checkbox"/> Steel							
Interior Condition	<input type="checkbox"/> Above Average <input type="checkbox"/> Average <input type="checkbox"/> Below Average		Prior Damage	\$				
Exterior Condition	<input type="checkbox"/> Above Average <input type="checkbox"/> Average <input type="checkbox"/> Below Average							
Tires Condition	<input type="checkbox"/> Above Average <input type="checkbox"/> Average <input type="checkbox"/> Below Average		No of Wheels	Wheel Size				
<b>Trailer Dimensions</b>	Width		Internal Width		Length		Carrier	
	Height		Internal Height		Floor		Rear Doors	
	Floor		Rear Doors	<input type="checkbox"/> Roll Up <input type="checkbox"/> Swing Out				
	Trailer Type		Exterior					
	Refer Unit		Interior					

**Equipment**

Exterior	Dump	Tank	Aluminum Tank	Livestock
<input type="checkbox"/> Headboard (Flatbed)	<input type="checkbox"/> Heated Body	<input type="checkbox"/> Length	<input type="checkbox"/> Length	
<input type="checkbox"/> Vapor Recovery	<input type="checkbox"/> Vibrator	<input type="checkbox"/> Steel Tank	<input type="checkbox"/> Gallons	
<input type="checkbox"/> Liftgate	<input type="checkbox"/> Coal Door	<input type="checkbox"/> Blower	<input type="checkbox"/> Chem. Solvent	
<input type="checkbox"/> SS Nose and Rear	<input type="checkbox"/> 2-Way Gate	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Vapor Recovery	
<input type="checkbox"/> Side Door	<input type="checkbox"/> CD Changer	<input type="checkbox"/> Full Frame	<input type="checkbox"/> Heated Compartment	
<b>Flat Bed</b>	<input type="checkbox"/> Watertight	<input type="checkbox"/> Compartments	<input type="checkbox"/> Manifold Lines	
<input type="checkbox"/> Headboard	<input type="checkbox"/> Rollover Canvas	<input type="checkbox"/> Rubber Lined	<input type="checkbox"/> Non-Coded Compartments	
<input type="checkbox"/> Ratchet Set Tie Down	<input type="checkbox"/> Auto Roll Canvas	<input type="checkbox"/> Number of Gallons		
<input type="checkbox"/> Tarp and Side Kit	<input type="checkbox"/> HD Floor & Sides			
<input type="checkbox"/> Tool Box		<input type="checkbox"/> No Insulation	<input type="checkbox"/> 3 Floors	
<input type="checkbox"/> D Rings	<b>Grain</b>	<input type="checkbox"/> Additional Insulation	<input type="checkbox"/> Straight Floor	
<input type="checkbox"/> 13" or less Drop (Drop Deck Trailers)	<input type="checkbox"/> Welded Const	On Board Pump	<input type="checkbox"/> Center Rear Door	
<input type="checkbox"/> Stake Pockets	<input type="checkbox"/> Steel		Meter Type	<input type="checkbox"/> Side Door Middle
	<input type="checkbox"/> 72" Sides		Size	<input type="checkbox"/> Non-Removable Deck
	Hoppers	<input type="checkbox"/> Farm Delivery Spec.	<input type="checkbox"/> Walking Floor	
		<input type="checkbox"/> Hazard Material Spec.		
		<input type="checkbox"/> Non Coded		

**Comments**