



# Private Passenger Vehicle

1.888.475.9975 Phone

www.vvsi.com

Valuation Request Form

1.888.475.9935 Fax

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: \_\_\_\_\_ Appraiser Name: \_\_\_\_\_

Appraiser Phone / Email: \_\_\_\_\_ Appraisal Amount: \_\_\_\_\_ ACV Amount: \_\_\_\_\_

**VIN:** \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Body Style: \_\_\_\_\_ Engine: \_\_\_\_\_ Transmission: \_\_\_\_\_

4WD: \_\_\_\_\_ AWD: \_\_\_\_\_ Mileage: \_\_\_\_\_ Previous Salvage/Branded Title: \_\_\_\_\_

*Options*

<u>Power Options</u>	<u>Décor Equipment</u>	<u>Conditions</u>
Power Windows	Interior Trim	<u>Interior</u>
Power Locks	Wheel Type	Seats
Power Driver Seat	Roof Type	Dash
Power Passenger Seat		Carpet
<u>Other Equipment</u>	Spoiler	Headliner
Rear Wipers		<u>Exterior</u>
Headlight Washer		Body
Heated Mirrors		Paint
Towing Equipment	<u>Safety Equipment</u>	Glass
<u>Convenience Options</u>	Theft Deterrent	<u>Drivetrain</u>
A/C	Disc Brakes:	Engine
Telescopic Wheel	ABS:	Transmission
Audio and Nav System:	Air Bags:	<u>Tires</u>
Premium Sound	Fog Lights	Front Tire Wear Remaining _____ %
Keyless Entry	Other Items: _____	Rear Tire Wear Remaining _____ %
Heated Seats		
Tinted Glass		

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