

Trade Evaluation Appraisal Form

Name: _____

Date: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Phone: _____

Unit to Appraise

Make: _____

Model: _____

Hours: _____

Serial Number: _____

Year: _____

Transmission Type: _____

Options: _____

Condition: 1 being Poor, 5 Being Average, 10 Being Show Room Condition

Paint: _____ Sheet Metal: _____ Mechanical: _____ Tires: _____

Hydraulics: _____ Cab, Seat, Upholstery: _____ Electrical/Battery: _____

Comments: _____

Service History: _____

Known Items that need Service Attention: _____

Please Include Photos to Give General Representation of the Product. Prefer image that shows Right & Left Side, Front & Rear of Tractor/Implement, Cab/Seat/Platform Condition, Any Area that may need service or attention. Email Pictures to dougvaehren@ctcis.net or Text to Our Text Only Hotline: **(660)-441-0906**

Estimated Value You Would Like to Get: _____

Signature: _____

Date: _____