



# Small Marine

Valuation Request Form

1.888.475.9975 Phone

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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: \_\_\_\_\_

**HIN:** \_\_\_\_\_

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

Type: \_\_\_\_\_ Length: \_\_\_\_\_ Hull Material: \_\_\_\_\_ Hours: \_\_\_\_\_  
 Previous Salvage/Branded Title: \_\_\_\_\_

### Options

Engine / Propulsion	Additional Description	Trailer
Engine Type _____	Seating Capacity _____	Trailer Make or Not Inc _____
Engine Mfr. _____	Cover _____	Trailer Axles _____
Eng #/HP _____	Cabin _____	Trailer Winch _____
Propulsion _____	Head _____	Power Tongue Jack _____
Trolling Motor _____	Halon _____	
Trolling Thrust _____	Ice Chest #/Size _____	
Sail Type _____		
Number Of Sails _____		

### Conditions

#### Interior

Seats \_\_\_\_\_

Carpet \_\_\_\_\_

#### Propulsion

Engine \_\_\_\_\_

Sails \_\_\_\_\_

#### Exterior

Hull \_\_\_\_\_

Paint \_\_\_\_\_

Glass \_\_\_\_\_

#### Trailer

Trailer \_\_\_\_\_

#### Electronics

Entertainment \_\_\_\_\_

Fish Finder \_\_\_\_\_

Depth Finder \_\_\_\_\_

Communications \_\_\_\_\_

#### Fish and Ski Equipment

Live Well \_\_\_\_\_

Bait Box \_\_\_\_\_

Rod Holders \_\_\_\_\_

Outriggers \_\_\_\_\_

Ski Tower \_\_\_\_\_

Swing Platform \_\_\_\_\_

Refurbishments \_\_\_\_\_ Date/Cost \_\_\_\_\_ Prior Damage Description \_\_\_\_\_ Amount \_\_\_\_\_