



Large Marine

Valuation Request Form

1.888.475.9975 Phone

www.vvsi.com

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: _____

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. _____	Floor Plan _____	Trailer Axles _____
Eng #/HP _____	Cover _____	Trailer Winch _____
Propulsion: _____	Cabin _____	Power Tongue Jack _____
Sail Type _____	A/C _____	
Number Of Sails _____	Head _____	<i>Conditions</i>
<u>Electronics</u>	Galley _____	<u>Interior</u>
Entertainment _____	Halon _____	Seats _____
Fish Finder _____	Ice Chest #/Size _____	Carpet _____
Depth Finder _____	Windlass Anchor _____	<u>Propulsion</u>
Communications _____	<u>Fish and Ski Equipment</u>	Engine _____
GPS _____	Live Well _____	Sails _____
Radar _____	Bait Box _____	<u>Exterior</u>
Plotter/Auto Pilot _____	Rod Holders _____	Hull _____
Interface _____	Outriggers _____	Paint _____
Generator _____	Ski Tower _____	Glass _____
Generator KW _____	Swing Platform _____	<u>Trailer</u>
Shore Power _____		Trailer _____

Refurbishments _____ Date/Cost _____ Prior Damage Description _____ Amount _____