Large Marine

Valuation Request Form

1.888.475.9975 *Phone*
1.888.475.9935 *Fax*
www.vvsi.com
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: Choose One

Length: _____ Hull Material _____ Hours _____

Previous Salvage/Branded Title: ☐

Options

Engine / Propulsion

Engine Type Choose

Engine Mfr. _____

Eng #/HP _____

Propulsion: Choose One

Sail Type None

Number Of Sails _____

Electronics

Entertainment _____

Fish Finder ☐

Depth Finder ☐

Communications Choose

GPS ☐

Radar ☐

Plotter/Auto Pilot ☐

Interface ☐

Generator ☐

Generator KW _____

Shore Power ☐

Additional Description

Seating Capacity _____

Floor Plan _____

Cover Choose

Cabin Choose

A/C ☐

Head ☐

Galley ☐

Halon ☐

Ice Chest #/Size _____

Windlass Anchor ☐

Fish and Ski Equipment

Live Well Choose

Bait Box Choose

Rod Holders Choose

Outriggers _____

Ski Tower ☐

Swing Platform ☐

Trailer

Trailer Make or Not Inc _____

Trailer Axles _____

Trailer Winch Choose

Power Tongue Jack ☐

Conditions

Interior

Seats Choose One

Carpet Choose One

Propulsion

Engine Choose One

Sails Choose One

Exterior

Hull Choose One

Paint Choose One

Glass Choose One

Trailer

Trailer Choose One

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