


<b>RTR Services Inc. DUMP TRUCK CONDITION REPORT</b>				<b>RTR #:</b> 1123397-01			
		<b>ACCOUNT NUMBER:</b>					
		<b>ACCOUNT NAME:</b>					
<b>YEAR:</b>	1994	<b>MILES</b>	487,765	<b>VIN#:</b>	1M2P270C4RM020412		
<b>MAKE:</b>	Mack	<b>GVW:</b>	80,000	<b>BED HEIGHT</b>			
<b>MODEL:</b>	RD 688S	<b>WHEELBASE:</b>		<b>COLOR: EXTERIOR:</b>	White		
<b>ENGINE:</b>	Mack 6-Cyl. 12.0 L	<b>HP</b>		<b>INTERIOR:</b>	Black		
<b>TRANS:</b>	Manual 8LL	<b>FUEL:</b>	<input type="checkbox"/> GAS <input checked="" type="checkbox"/> DIESEL	<b>KEYS: IGNITION:</b>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO • <b>DOOR:</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
		<b>ANTIFREEZE TESTED:</b>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<b>RATING:</b>			
<b>DOES MOTOR RUN?</b>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>CAN IT BE DRIVEN?</b>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<b>COLLISION DAMAGE?</b>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
<b>PHYSICAL APPEARANCE</b>							
<b>BODY</b>		<b>GD</b>	<b>FR</b>	<b>PR</b>	<b>N/A</b>	<b>COMMENTS</b>	<b>OPTIONS</b>
	FRONT BUMPER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bent on passenger side	<input type="checkbox"/> PWR STEERING
	HEAD LIGHTS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<b>BRAKES</b>
	HOOD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/> AIR
	TURN SIGNALS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Passenger turn signal cracked	<input type="checkbox"/> HYD
	GRILL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> PWR LOCKS
	D FRONT FENDER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> PWR WINDOWS
	D DOOR	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> PWR SEATS
	D DUMP BED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> PWR MIRRORS
	REAR GATE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/> AIR CONDITIONER
TAIL LIGHTS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> AIR RIDE SEAT D/P _____	
REAR PANEL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> AIR RIDE SUSPENSION	
P FRONT FENDER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> AM FM RADIO	
P FRONT DOOR	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> TAPE / CD / CB? _____	
P DUMP BED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> HITCH TYPE _____	
TOP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/> TARP SYSTEM	
<b>TIRES</b>	D FRONT	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30 % 315 / 80R 22.5 SIZE:	<input checked="" type="checkbox"/> TANDEM AXLE
	D REAR A1 (S/D?)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30 % 315 / 80R 22.5 SIZE:	<input type="checkbox"/> ENGINE BRAKE
	D REAR A2 (S/D?)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30 % 315 / 80R 22.5 SIZE:	<input type="checkbox"/> TOOL BOX _____
	P FRONT	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30 % 315 / 80R 22.5 SIZE:	<b>FUEL TANKS</b>
	P REAR A1 (S/D?)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30 % 315 / 80R 22.5 SIZE:	<input type="checkbox"/> SINGLE GAL _____
	P REAR A2 (S/D?)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30 % 315 / 80R 22.5 SIZE:	<input type="checkbox"/> DUAL GAL _____
	SPARE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	% SIZE:	<input checked="" type="checkbox"/> MUD FLAPS
<b>GLASS</b>	WINDSHIELD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<b>WHEELS</b>
	D FRONT DOOR	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/> ALUMINUM
	REAR WINDOW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> STEEL
	P FRONT DOOR	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> BUD
<b>INTERIOR</b>	MIRRORS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> SPOKE
	DASH	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> EXHAUST S/D? _____
	DOOR PANELS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<b>SUSPENSION</b>
	SEAT(S)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> AIR
	FLOORING	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/> SPRING
HEADLINER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> PAD	
DUMP BED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Leaning	<input type="checkbox"/> LIFT/TAG AXLE	
<b>MECHANICAL</b>		<b>GD</b>	<b>FR</b>	<b>PR</b>	<b>UKN</b>	<b>N/A</b>	<b>COMMENTS:</b>
	ENGINE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	TRANSMISSION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	CLUTCH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	DIFFERENTIALS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	BRAKES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	FRONT END	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	REAR END	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
BATTERY/ELECTR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<b>COMMENTS:</b> Mileage unverified. Dump won't go up, has major air leak. Not driveable.							

1/6/2022

EMPLOYEE'S FULL NAME (PLEASE PRINT) \_\_\_\_\_ DATE \_\_\_\_\_ EMPLOYEE'S SIGNATURE \_\_\_\_\_  
 By signature above I do hereby certify all information contained within this report to be true and accurate to the best of my knowledge at present.

**RTR Services Inc. • 2747 Pence Loop SE Salem OR 97302 • 1.800.238.3294 • FAX 503.399.0421**

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