

|                                                                                                                          |                                                                                                                                                                                                                                               |                                     |                                        |                                                                    |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------------------------------------|--------------------------------------------------------------------|----------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>RTR Services Inc.<br/>FLATBED/CAR HAULER<br/>CONDITION REPORT</b>                                                     |                                                                                                                                                                                                                                               |                                     |                                        | <b>RTR #:</b> 5083046-01<br><b>ACCOUNT</b><br><b>ACCOUNT NAME:</b> |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>YEAR:</b>                                                                                                             | 2024                                                                                                                                                                                                                                          | <b>BODY TYPE:</b>                   | Flatbed                                | <b>VIN #:</b>                                                      | 5E7HP2520RA003185                      |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>MAKE:</b>                                                                                                             | Kraftsman                                                                                                                                                                                                                                     | <b>CAR CAPACITY</b>                 | N/A                                    |                                                                    |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>MODEL:</b>                                                                                                            | HP-40                                                                                                                                                                                                                                         | <b>COLOR:</b>                       | <b>EXTERIOR:</b>                       | Wood/ Black                                                        |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>LENGTH:</b>                                                                                                           | 20' + 5'                                                                                                                                                                                                                                      | <b>WIDTH:</b>                       | 102"                                   | <b>HEIGHT:</b>                                                     |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>HITCH:</b>                                                                                                            | <input type="checkbox"/> GOOSE NECK <input checked="" type="checkbox"/> PINTLE <input type="checkbox"/> 5 <sup>TH</sup> WHEEL PIN <input type="checkbox"/> 1 7/8" BALL <input type="checkbox"/> 2" BALL <input type="checkbox"/> 2 5/16" BALL |                                     |                                        |                                                                    |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>CAN IT BE TOWED?</b>                                                                                                  | <input checked="" type="checkbox"/> YES                                                                                                                                                                                                       | <input type="checkbox"/> NO         | <b>COLLISION DAMAGE?</b>               | <input type="checkbox"/> YES                                       | <input checked="" type="checkbox"/> NO |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>KEYS:</b>                                                                                                             |                                                                                                                                                                                                                                               |                                     |                                        |                                                                    |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO                                                      |                                                                                                                                                                                                                                               |                                     |                                        |                                                                    |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>PHYSICAL APPEARANCE</b>                                                                                               |                                                                                                                                                                                                                                               |                                     |                                        |                                                                    |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>BODY</b>                                                                                                              | <b>FRONT PANEL</b>                                                                                                                                                                                                                            | <input type="checkbox"/> GD         | <input checked="" type="checkbox"/> FR | <input type="checkbox"/> PR                                        | <input type="checkbox"/> N/A           | <b>COMMENTS</b>                     | <b>OPTIONS</b><br><input checked="" type="checkbox"/> AIR RIDE SUSPENSION<br><input type="checkbox"/> SPRING SUSPENSION<br><input checked="" type="checkbox"/> AIR BRAKES<br><input type="checkbox"/> ELECTRICAL BRAKES<br><input type="checkbox"/> HYD BRAKES<br><input type="checkbox"/> SLIDER AXLE<br><b>WHEELS</b><br><input type="checkbox"/> BUD<br><input type="checkbox"/> SPOKE<br><input type="checkbox"/> STEEL<br><input checked="" type="checkbox"/> ALUMINUM<br><input checked="" type="checkbox"/> TOOL BOX _____<br><input type="checkbox"/> MUD FLAPS<br><input checked="" type="checkbox"/> LOADING RAMP<br><input type="checkbox"/> BATTERY<br><input type="checkbox"/> DOVE TAIL<br><input type="checkbox"/> TILT BED<br><input type="checkbox"/> WEDGE<br><input type="checkbox"/> WINCH<br><input type="checkbox"/> SPARE TIRE RACK<br><input type="checkbox"/> REAR DOOR<br><input checked="" type="checkbox"/> TANDEM AXLE<br><input type="checkbox"/> SIDE DOOR<br><input type="checkbox"/> LIFT/TAG AXLE<br><input type="checkbox"/> ENCLOSED |
|                                                                                                                          | <b>HITCH</b>                                                                                                                                                                                                                                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>D SIDE PANEL</b>                                                                                                                                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/>               | <input type="checkbox"/>                                           | <input checked="" type="checkbox"/>    |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>D SIDE TIE DOWNS</b>                                                                                                                                                                                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>REAR PANEL</b>                                                                                                                                                                                                                             | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input checked="" type="checkbox"/>    |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>P SIDE TIE DOWNS</b>                                                                                                                                                                                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               | Tool box damaged on passenger side. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>P SIDE PANEL</b>                                                                                                                                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/>               | <input type="checkbox"/>                                           | <input checked="" type="checkbox"/>    |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>REAR BUMPER</b>                                                                                                                                                                                                                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>TOP</b>                                                                                                                                                                                                                                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>RAMP(S)</b>                                                                                                                                                                                                                                | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>TIRES</b>                                                                                                             | <b>SIDE DOOR</b>                                                                                                                                                                                                                              | <input type="checkbox"/>            | <input type="checkbox"/>               | <input type="checkbox"/>                                           | <input checked="" type="checkbox"/>    |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>REAR DOOR</b>                                                                                                                                                                                                                              | <input type="checkbox"/>            | <input type="checkbox"/>               | <input type="checkbox"/>                                           | <input checked="" type="checkbox"/>    |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>D REAR A1 (S/D?)</b>                                                                                                                                                                                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               | % <b>SIZE:</b> 215/75/R17.5         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>D REAR A2 (S/D?)</b>                                                                                                                                                                                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               | % <b>SIZE:</b> 215/75/R17.5         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>D REAR A3 (S/D?)</b>                                                                                                                                                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/>               | <input type="checkbox"/>                                           | <input checked="" type="checkbox"/>    | % <b>SIZE:</b>                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>P REAR A1 (S/D?)</b>                                                                                                                                                                                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               | % <b>SIZE:</b> 215/75/R17.5         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>P REAR A2 (S/D?)</b>                                                                                                                                                                                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               | % <b>SIZE:</b> 215/75/R17.5         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>MECHANICAL</b>                                                                                                        | <b>P REAR A3 (S/D?)</b>                                                                                                                                                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/>               | <input type="checkbox"/>                                           | <input checked="" type="checkbox"/>    | % <b>SIZE:</b>                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>SPARE</b>                                                                                                                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>               | <input type="checkbox"/>                                           | <input checked="" type="checkbox"/>    | % <b>SIZE:</b>                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>TAILLIGHTS</b>                                                                                                                                                                                                                             | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               | <b>COMMENTS:</b>                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>SIGNAL LIGHTS</b>                                                                                                                                                                                                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>CLEARANCE LGT</b>                                                                                                                                                                                                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>SLIDER AXLES</b>                                                                                                                                                                                                                           | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>LANDING GEAR</b>                                                                                                                                                                                                                           | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                          | <b>AIR HOSE/GLAD</b>                                                                                                                                                                                                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    | <input type="checkbox"/>                                           | <input type="checkbox"/>               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>ELECTRIC PIGTAIL</b>                                                                                                  | <input type="checkbox"/>                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>               | <input type="checkbox"/>                                           |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>THIS IS NOT A MECHANICAL INSPECTION / IT IS A VISUAL INSPECTION ONLY / WE RECOMMEND YOU INSPECT PRIOR TO PURCHASE</b> |                                                                                                                                                                                                                                               |                                     |                                        |                                                                    |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>COMMENTS:</b>                                                                                                         |                                                                                                                                                                                                                                               |                                     |                                        |                                                                    |                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

\_\_\_\_\_  
 EMPLOYEE'S FULL NAME (PLEASE PRINT)

10/17/2025  
 \_\_\_\_\_  
 DATE

\_\_\_\_\_  
 EMPLOYEE'S SIGNATURE

All information contained within this report is deemed to be true and accurate to the best of my knowledge as of the date listed above.