		Services In								RTR #: 405386							3-02			
TRAILER CONDITION REPORT											ACCOUNT NUMBER: ACCOUNT NAME:									
YEAR: 2023				BODY	TYPE:	Flatbed			VIN#: 13N148202P1552				2040							
MAKE:		Fontaine			LICENSE:				STATE:			TAC	S: MN:				YR:			
MODEL:		HAVSF12WSA			COLOR:		EXTERIOR: V		W	ood / Black				IN	INTERIOR:		N/A			
LENGTH:		48'			WIDTH:		102"			HEIGHT:					<b>GVW</b> : 70,543		43			
HITCH:		☐ GOOSE NECK		□ P	PINTLE STH		WHEEL PIN 17			7/8" BALL 🔲 2" BALL				2 5/16" B	ALL					
IS IT ROAD READY? ☐ YES ☐ NO COLLISION DAMAGE? ☐ YES ☐ NO KEYS:													☐ YE	ES	⊠ NO					
PHYSICAL APPEARANCE																				
	FRONT PANEL		GD	FR	PR	N/A	COM	MENTS										OPTI		101
ВОДУ	HITCH D SIDE PANEL																		SUSPENS	
				$\boxtimes$												$\boxtimes$	AIR E		-	
	SIDE DOOR (S) REAR PANEL															$+ \Box$	HYD		CAL BRAK KES	ES
"	REAR DOOR (S)					$\boxtimes$											SLID	ER A	XLE	
	P SIDE PANEL REAR BUMPER TOP			$\boxtimes$												WH	IEELS □ B	UD		
				$\boxtimes$													□ sı	POKE		
INTERIOR	FLOOR D SIDE PANELS FRONT PANEL P SIDE PANEL CARGO RAILS					$\boxtimes \boxtimes$										_	☐ S <sup>-</sup>			
						$\boxtimes$											LIFT	TAG	AXLE	
						$\boxtimes$										$+ \Box$	-		RE RACK ATION UN	
_	CEILING					$\boxtimes$											REEI	FER H	HRS	_
	D FRONT D REAR A1 (S/D?) D REAR A2 (S/D?) D REAR A3 (S/D?) P FRONT P REAR A1 (S/D?) P REAR A2 (S/D?) P REAR A3 (S/D?) SPARE						% 50/s	SIZE:	295/	75R22	5					$\frac{1}{\boxtimes}$	TOO	_		
				$\boxtimes$	□    □								│ ⊠ MUD FLAPS │ □ ROLL UP REAR DOOR				OR			
TIRES							% SIZE: % SIZE:									LOA! BAT	_	RAMP		
#							% 00/00 SIZE: 295/75R22.5									DAI	IEKI			
							% 50/50 SIZE: 295/75R22.5 % SIZE:													
							%	SIZE:												
	TAIL LIGHTS		GD	FR 🖂	PR	UKN	N/A	COMMI	ENT	'S:										
;AL	SIGNAL LIGHTS CLEARANCE LGT SLIDER AXLES			$\boxtimes$																
CHANICAL							$\boxtimes$													
		GERATION																		
		NG GEAR																		
	AIR HOSE/GLAD ELECTR PIGTAIL			$\boxtimes$																
СО	MMENTS	<u></u> S:																		
6/5/2024																				
		EMPLOYEE'S FULI	L NAME (	PLEAS	E PRINT)			DATE						EMF	LOYEE'S SI	GNATU	IRE			
		By sid	nature ab	ove I d	o hereby	certify all info	ormation c	ontained withi	n this	report to	be true a	and acc	urate to th	ne best c	of my knowled	lge at p	resent.			