

Monthly Demo Check

Employee name _____

Date _____

VIN Last 6 _____

Model _____

KMs _____

Service _____

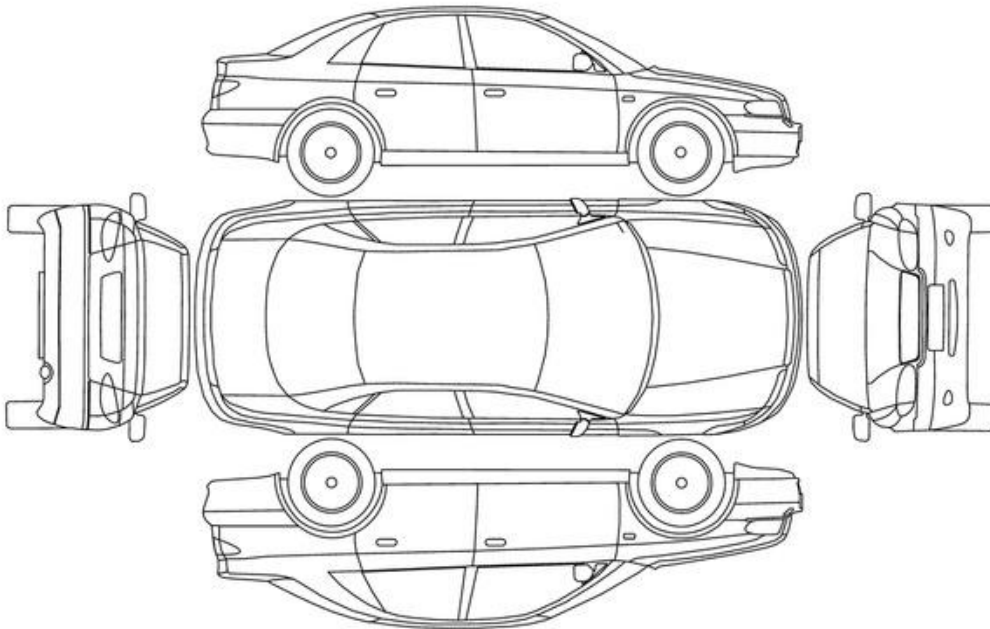
Plate# _____

Interior condition _____

Registration Expired Y N

Exterior condition _____

Insurance Expired Y N



Inspected by:

Print name _____

Signature _____

Date _____

Employee:

Print name _____

Signature _____

Date _____