

**SASKATCHEWAN MUTUAL INSURANCE COMPANY**  
**AUTOMOBILE APPRAISAL FORM**

Name and Address:

<b>Surname</b>	<b>First Name</b>	<b>Second Name</b>
<b>Number</b>	<b>Street</b>	
<b>City or Town</b>		<b>Postal Code</b>

Plate Number	Vehicle Year	Make/Model	Body Type	Serial Number	Odometer Reading

**ODOMETER READING MUST BE VIEWED BY THE APPRAISER AT THE TIME OF APPRAISAL.**

Additional Information Required: (Please attach)

Six (6) current coloured prints taken from different angles, including one of the interior and one of engine cavity. Pictures and appraisals are at owner's expense and are non-returnable, if accepted. Digital pictures are acceptable.

This is an appraisal only, not an agreement to insure. Coverage is not being provided until accepted by the SASKATCHEWAN MUTUAL INSURANCE COMPANY head office.

**Reverse side to be filled out by appraiser:**

Excellent: Restored to current maximum professional standards in every area

Fine: An extremely well maintained original showing minimal wear

Very Good: "OLDER RESTORATION" showing some wear

Good: Driveable vehicle needing work

**Please describe condition in detail. One word description is not sufficient.**

**Following to be filled out in detail by appraiser:**

1. Body (dents, rusting, paint, chrome, etc.) \_\_\_\_\_  
\_\_\_\_\_
2. Glass (cracked, discolored, etc.): \_\_\_\_\_
3. Upholstery (torn, soiled, worn, etc.): \_\_\_\_\_  
\_\_\_\_\_
4. Tires (Amount of wear - put A, B or C in box):  
A. 14/32" = new tire, B. 7/32" & over = 50% wear, C. 7/32" & less = poor condition  RF  RR  LF  RR  
Wheels: (brands and size) front: \_\_\_\_\_ rear: \_\_\_\_\_
5. Undercarriage, Steering, Suspension, Frame and Shocks: \_\_\_\_\_  
\_\_\_\_\_
6. Transmission and Differential (Repairs, modifications, etc.) \_\_\_\_\_  
\_\_\_\_\_
7. Electrical System (Lights, battery, operation and appearance): \_\_\_\_\_  
\_\_\_\_\_
8. Fuel and exhaust system: \_\_\_\_\_
9. Engine: Size \_\_\_\_\_ Condition and equipment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. Brakes \_\_\_\_\_  
In your opinion, is the automobile safe to operate on public roads?  Yes  No  
If not, please give comments: \_\_\_\_\_  
\_\_\_\_\_
11. How would you describe the general condition using our guidelines above:  
 Excellent  Fine  Very Good  Good
12. What would you consider a fair value: \_\_\_\_\_ On what do you base  
this value? (Books, etc.) \_\_\_\_\_ If this vehicle is not listed in the Old Cars Price Guide what was  
used as a comparable vehicle type? \_\_\_\_\_
13. What in your opinion makes this car worth more than an ordinary car of the same model?  
\_\_\_\_\_  
\_\_\_\_\_
14. Did you personally inspect this auto?  Yes  No  
If no, please comment on how appraisal was done: \_\_\_\_\_
15. Additional Comments/Information \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Signature of Appraiser:**

\_\_\_\_\_  
**Date**

Please print: Name of Appraiser: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Business \_\_\_\_\_