

DATOS GENERALES

Propietario: _____

Nombres y apellidos de la persona al momento de la inspección: _____

Identificación No.: _____ Teléfono: _____

Relación con el dueño del vehículo: _____

DATOS DE LA INSPECCIÓN

Nombre del Inspector: _____ Fecha de Inspección: _____ Hora: _____

Dirección en que se efectuó la inspección: _____

DATOS DEL VEHÍCULO

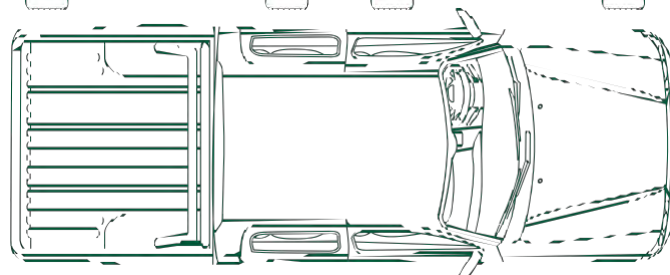
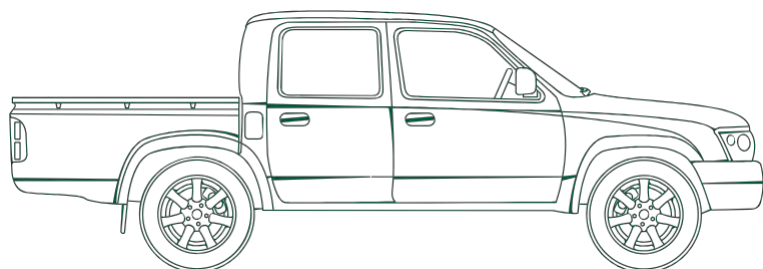
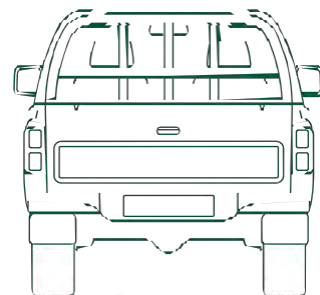
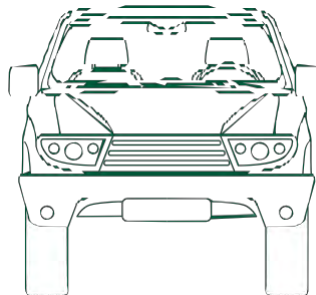
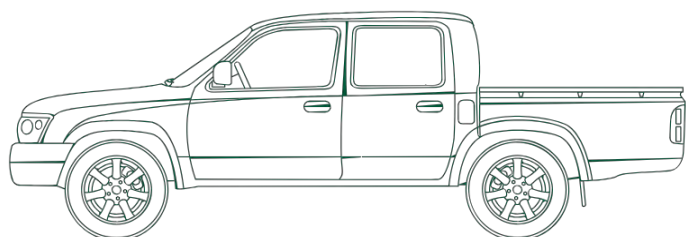
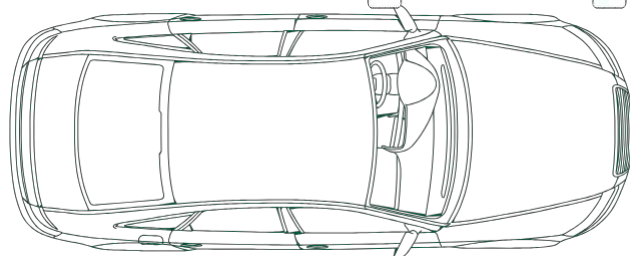
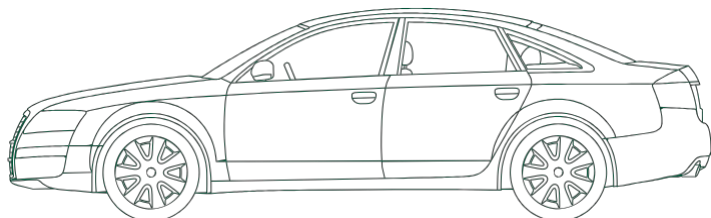
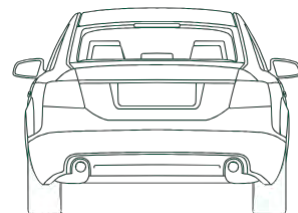
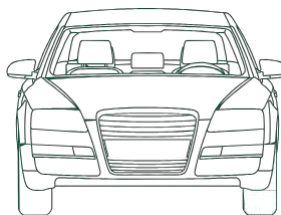
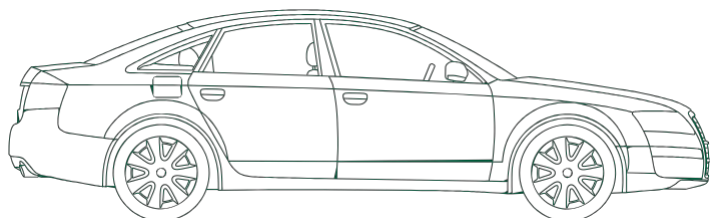
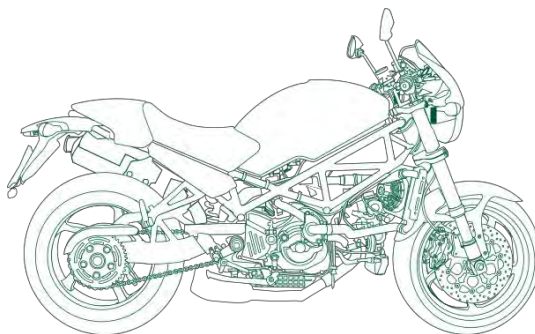
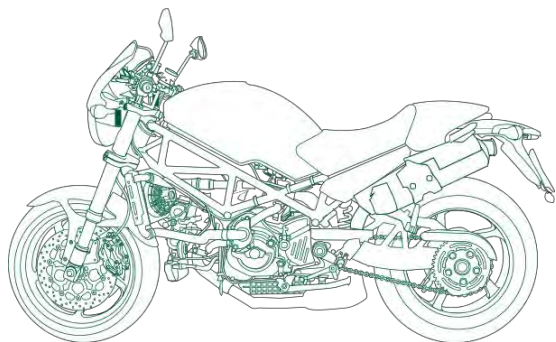
Marca _____ Modelo _____ Año _____

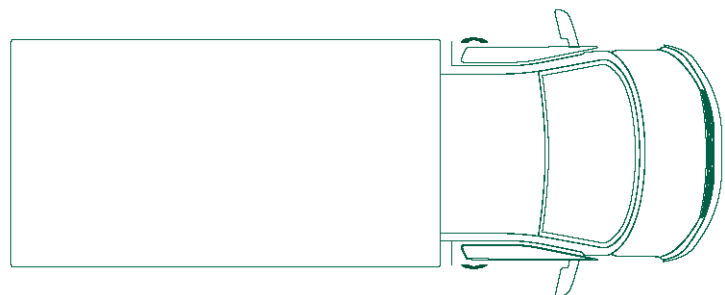
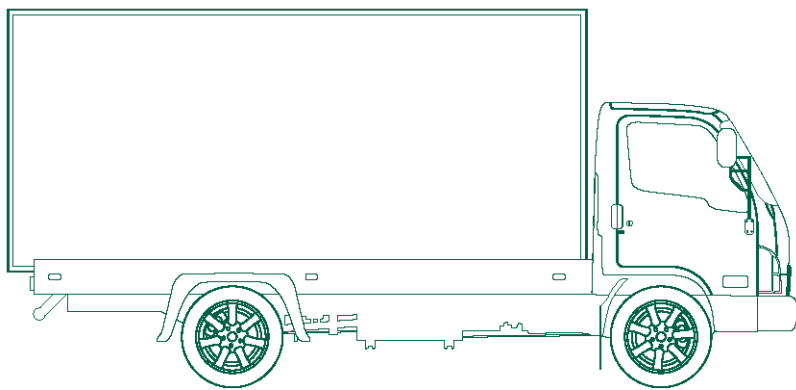
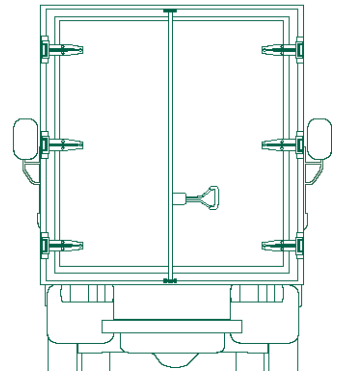
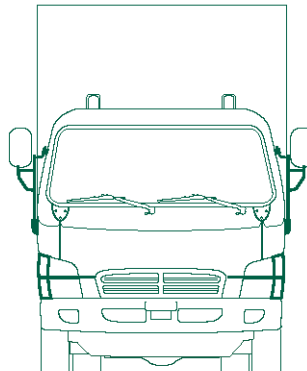
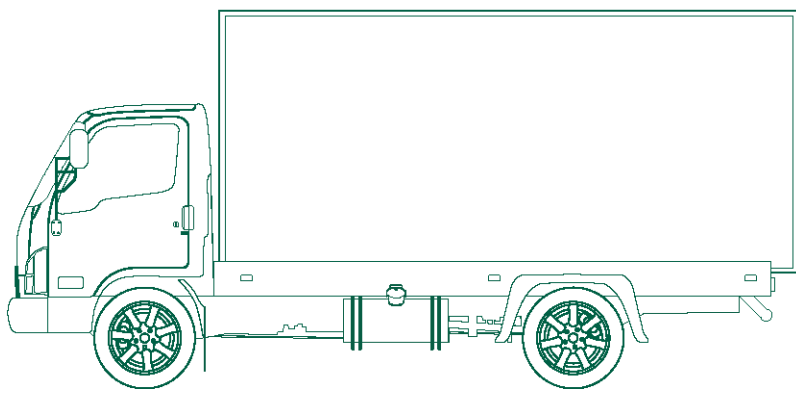
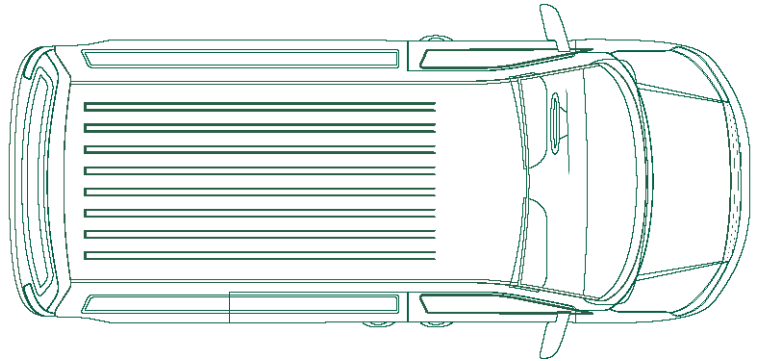
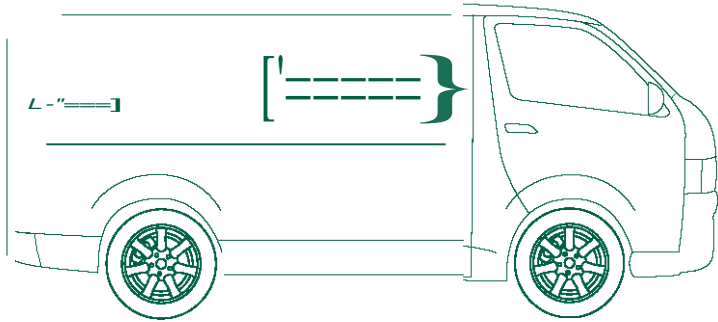
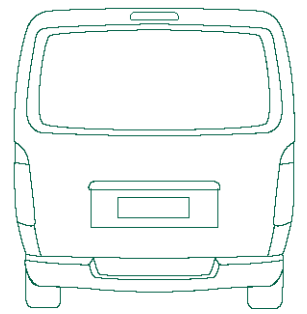
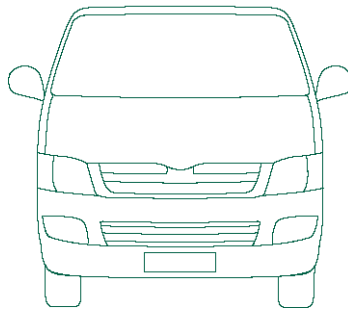
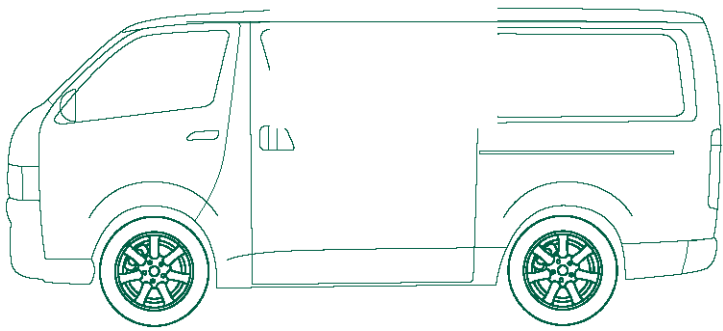
Color _____ Placa _____ Uso _____

Combustible _____ Kilometraje _____

Chasis _____

Motor _____





OBSERVACIONES: _____

Yo _____ doy fe que los datos anotados corresponden a los mismos sufridos para el vehículo arriba descrito.

Firma del cliente

Firma del inspector