

Truck Identification & Equipment Report

Adjuster: **Holly Haffey**

Policy Number:

Adjuster Phone: **513-333-2236**

Claim Number: **235503685**

Location of Vehicle: **Economy towing Flagstaff AZ**

Date Appraised: **01/28/2026**

1. UNIT IDENTIFICATION

Year 2019	Date Mfg. 11/2018	Make Freightliner	Model Cascadia	Unit No. 877472	License No. Missing	State _____
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VIN/Serial No: **3AKJGLDR1KSLH5402**

Mileage: **615935**

2. CAB

<input type="checkbox"/> Cab Over	<input type="checkbox"/> Straight	<input type="checkbox"/> Steel	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other	Paint Condition Color: White
<input checked="" type="checkbox"/> Conventional	<input checked="" type="checkbox"/> Sleeper	<input checked="" type="checkbox"/> Aluminum			<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input checked="" type="checkbox"/> Average <input type="checkbox"/> Poor
Hood	Seat(s)		Interior Condition		Interior
<input checked="" type="checkbox"/> Fiberglass	<input type="checkbox"/> Single	<input type="checkbox"/> Manual	<input type="checkbox"/> Excellent <input checked="" type="checkbox"/> Average		<input checked="" type="checkbox"/> Standard <input type="checkbox"/> Deluxe
<input type="checkbox"/> Alumnium	<input checked="" type="checkbox"/> Single & Jump	<input checked="" type="checkbox"/> Air	<input type="checkbox"/> Good <input type="checkbox"/> Poor		<input type="checkbox"/> Classic
Special Paint	Sleeper Length 72"	Single	Double Bunk	Condo	Mid Roof Flat Top
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Radio	<input type="checkbox"/> AM <input checked="" type="checkbox"/> AM/FM <input checked="" type="checkbox"/> A/C	<input checked="" type="checkbox"/> CB	<input type="checkbox"/> Roof Air Deflector	<input checked="" type="checkbox"/> Side Fairings	
<input type="checkbox"/> CASS	<input checked="" type="checkbox"/> CD		<input type="checkbox"/> Full Aero Dynamic Package	<input type="checkbox"/> APU Serial No. _____	

3. POWER TRAIN

Engine Liter Model DD15	H.P. 450	<input type="checkbox"/> Gas	<input type="checkbox"/> Four	<input type="checkbox"/> Eight	<input checked="" type="checkbox"/> Inline	<input type="checkbox"/> Engine Brake
Did Engine Run After Overturn?		<input checked="" type="checkbox"/> Diesel	<input checked="" type="checkbox"/> Six	<input type="checkbox"/> Five	<input type="checkbox"/> V	<input checked="" type="checkbox"/> Turbo
<input type="checkbox"/> Yes <input type="checkbox"/> No		Oil Level	Coolant Level		Notes:	<input type="checkbox"/> Documents Overhaul
<input type="checkbox"/> Unknown		UNK	UNK		_____	
Transmission Make Detroit	Model D12		Speeds	12	Auxiliary Transmission	PTO
Rear Axle Make Meritor	Model MT40		Ratio	307	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Documents Overhaul
					<input type="checkbox"/> Single <input checked="" type="checkbox"/> Twin Screw	<input type="checkbox"/> Tag
					<input type="checkbox"/> Tandem <input type="checkbox"/> Tri	<input type="checkbox"/> Pusher

4. FRAME

<input checked="" type="checkbox"/> Steel	<input type="checkbox"/> Double Reinforcement	<input type="checkbox"/> Aluminum	<input type="checkbox"/> Extended	<input checked="" type="checkbox"/> Standard Length	Wheel base in inches 227
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5. FIFTH WHEEL

Make Jost	Model _____	<input type="checkbox"/> Fixed	<input checked="" type="checkbox"/> Sliding	<input type="checkbox"/> Manual	<input checked="" type="checkbox"/> Air
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6. FUEL TANK

Make Freightliner	Quantity 2	Capacity 120 Each	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> Aluminum	<input type="checkbox"/> Painted	<input type="checkbox"/> Step
					<input type="checkbox"/> Polished	<input type="checkbox"/> Saddle

7. SUSPENSION

Front Axle Capacity 13300 lb	Steering <input type="checkbox"/> Man. <input checked="" type="checkbox"/> Power	Brakes Disk Frt Drum Rear	<input type="checkbox"/> Hydraulic	<input checked="" type="checkbox"/> Air	<input type="checkbox"/> Power Assist	<input type="checkbox"/> DOT 121	<input checked="" type="checkbox"/> Air brake dryer
Rear Suspension Wt. Capacity 40000 lb		Rear Suspension	<input checked="" type="checkbox"/> Air Bag	<input type="checkbox"/> Air Leaf	<input type="checkbox"/> Hendrickson	<input type="checkbox"/> Spring	<input type="checkbox"/> Torsion <input type="checkbox"/> Other

8. WHEELS

FRONT	<input checked="" type="checkbox"/> Disc	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> Polished	<input type="checkbox"/> Painted
	<input type="checkbox"/> Spoke	<input checked="" type="checkbox"/> Aluminum	<input type="checkbox"/> Chrome	
REAR OUTER	<input checked="" type="checkbox"/> Disc	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> Polished	<input type="checkbox"/> Painted
	<input type="checkbox"/> Spoke	<input checked="" type="checkbox"/> Aluminum	<input type="checkbox"/> Chrome	
REAR INNER	<input checked="" type="checkbox"/> Disc	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> Polished	<input type="checkbox"/> Painted
	<input type="checkbox"/> Spoke	<input checked="" type="checkbox"/> Aluminum	<input type="checkbox"/> Chrome	

9. TIRES

	Make & Size	/32	HWY	Traction	Recap	Bias	Radial	Damaged
LF	Goodyear	9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
LRFO	Goodyear	16	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LRFI	Goodyear	10	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LRRO	Goodyear	13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LRRI	Goodyear	9	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
RF	Goodyear	9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
RRFO	Goodyear	10	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
RRFI	Goodyear	16	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
RRRO	Tomoro	13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
RRRI	Tomoro	9	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

10. EXHAUST

<input checked="" type="checkbox"/> Single	<input type="checkbox"/> Dual	<input checked="" type="checkbox"/> Undercab	<input type="checkbox"/> Vertical	<input type="checkbox"/> Straight Pipe	<input type="checkbox"/> Mufflers	<input type="checkbox"/> Steel	<input type="checkbox"/> Chrome
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Comments & Additional Equipment: _____