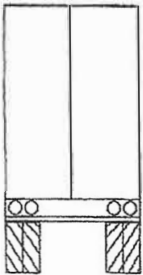
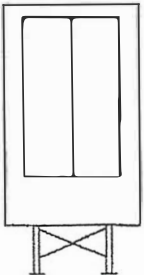
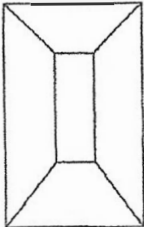
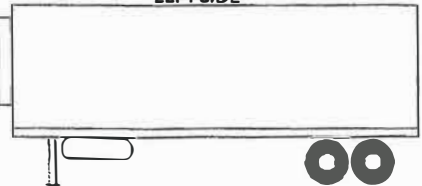

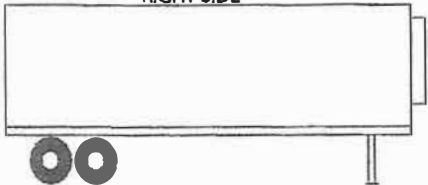
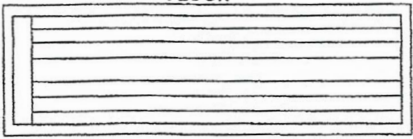


# PROOF OF DELIVERY/INSPECTION FORM

UNIT# \_\_\_\_\_ DATE \_\_\_\_\_

VIN# \_\_\_\_\_

A THOROUGH AND COMPLETE TRAILER INSPECTION IS REQUIRED AFTER TRIP IS COMPLETE. THIS REPORT MUST BE COMPLETED AND RETURNED TO ONEWAYTRAILERS.

REAR 	FRONT 	INTERIOR 	<small>MARK CLEARLY ALL DAMAGE FOUND BY INSPECTION SYMBOLS</small>  B = BENT      S = SCRAPED BR = BROKEN    P = PATCHED C = CUT        H = HOLE D = DENT       M = MISSING
LEFT SIDE 	ROOF 		
RIGHT SIDE 	FLOOR 		

PICK UP LOCATION: \_\_\_\_\_

DELIVERED TO: \_\_\_\_\_

DESCRIBE ANY DAMAGE HERE

TRAILER RECEIVED BY: (PRINT NAME) \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_