

Client	
Client Address	
Location of equipment	
Type of Equipment	
Manufacturer Name	
Equipment Age	
Model Number	
Serial Number	
Accessories/Attachment Details	
Is the Equipment?	Free Standing Fixed to Premises
General comments regarding equipments condition	

PHOTOS MUST BE TAKEN DURING INSPECTION

Below is confirmation that I have inspected and photographed the above asset/s and have completed this report in full:

Name:

Title/Company:

Address where inspection took place:

Signature:

Date: