

**VEHICLE CONDITION STATEMENT**  
**AFFIRMATIVE INSURANCE COMPANY**  
 PO Box 702109\*Dallas TX 75370-2109

MARK THE VEHICLE WITH  
 PROPER DAMAGE CODES:  
 C=CHIPPED GLASS  
 B=BROKEN GLASS  
 S=SCRATCH  
 D=DENT  
 M=MISSING (wheel covers,etc)

**VEHICLE INFORMATION**

POLICY#: \_\_\_\_\_  
 INSURED: \_\_\_\_\_  
 YEAR: \_\_\_\_\_  
 MAKE: \_\_\_\_\_  
 MODEL: \_\_\_\_\_  
 VIN (Last 6 Digits): \_\_\_\_\_  
 ODOMETER READING: \_\_\_\_\_

**GENERAL CONDITION**

- 1) Any unrepaired collision or storm damage? Yes/No
- 2) Any rust or significant wear and tear on car? Yes/No
- 3) Any chipped or broken glass on vehicle? Yes/No
- 4) Any other type damage to the car? If yes, describe and designate on vehicle drawings:
- 5) If no damage to the vehicle, certify by initialing:  
 No Damage      Insured Initials: \_\_\_\_\_

**Insured Statement: I hereby understand that there is no coverage for non factory installed equipment. In addition, coverage for accessories/customization is limited to Original Factory Installed equipment.**

**Insured's Signature:** \_\_\_\_\_

**Accepted By:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ **TIME:** \_\_\_\_\_  
 Columbia  Charleston  Greenville  Spartanburg  St Andrews   
 Sumter  Phone Binder

