



(A unit of Metro Motors)

### EVALUATION FORM

No.

Date :

Customer Name : \_\_\_\_\_

Phone / Mobile : \_\_\_\_\_

Address : \_\_\_\_\_

Vehicle Details : Make \_\_\_\_\_ Model \_\_\_\_\_ Version \_\_\_\_\_

Color \_\_\_\_\_ Year \_\_\_\_\_ Insurance \_\_\_\_\_

Tax \_\_\_\_\_ Kms \_\_\_\_\_ HP \_\_\_\_\_

Accident History : \_\_\_\_\_

Price Expected : \_\_\_\_\_

Price Offered : \_\_\_\_\_

Mode of Enquiry : Walk in ☐ Advertisement ☐ Reference ☐

Lead Through : \_\_\_\_\_

Remarks : \_\_\_\_\_

Evaluated by

Authorised by