

Precinct #4 Surplus

FID 120

Green hood Freightliner[®] dump Truck

CAT motor - E model

9 speed Eaton Trans

266590, miles

Vin # 1FUYPRTB9KP356158

Year - 1989

Drive Tires	285 - 75 - 24.5	Need Replaced
Steer Tires	285 - 75 - 24.5	OK Hold Air

✓ Pull Type Sheep foot Roller 20'
Needs Tires

GMC Kodiak 1991

Cat motor 3408 Auto Trans

Vin # 1GBM7H1J2N5101176

miles 201424

2,000 gal tank

quadco Auto Trans 4 speed

295 - 75 - 22.5 Rear x4 good

295 - 75 - 22.5 Steer x2 good

TANK Leaks

June 12, 2023
(Exhibit #4)

Ford F150 2008

Vin 1FTPW12V38KC4987

Tires good

Body good

Runs but needs work 5.4 V-8

New Holland Tractor model #B0100C5

good Tires 5,346 HR.

Need motor

Model #0521A - A-Boom
Ammo boom shifter.

✓ 1996 Chevrolet 3500

160535 miles

V# 1GBJC34K05E2535064

Standard 4Speed

1 Ton Flatbed

Runs

(Chain Saw)

15 Chain Saw blades Chain 4

4 pole saw blades

6 chain saw motors, 1 whole chainsaw

3 (18") Bars 2 (16") Bars

(Weed Eaters)

4 Heads, 2 whole Weed Eaters, 1 w/o Head

2 @ box ~~Miscellaneous~~
miscellaneous parts

7' ALAMO Timber CAT Sickle
in good shape has not been used
in years

Excavator Bucket

30" x 45"

25 or 30 Old Miscellaneous Tires
and wheels that do not fit anything we
have

Portable hot oil TANK 5,000 gal

250 gal overhead fuel tank

Vehicle Inspection Form

Inventory ID: _____

Asset Number: _____

Fair Market Value: _____

Short Description:

Year 1991

Make GM

Model Kodiak

VIN:

1	G	B	M	7	H	1	J	2	N	J	1	0	1	1	7	6
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Title Restriction: Y N

Odometer:

2	0	1	4	2	4
---	---	---	---	---	---

Miles

Kilometers

Odometer Accurate Y N:

Long Description:

This Vehicle: Starts Starts with a Boost & Runs/Driveable Engine Runs Does Not Run For Parts Only

Engine- Type: L, V Gas Diesel Engine Propane/Natural Gas Gas/Electric Hybrid

Engine Condition: Runs Needs repair is in unknown condition

Repairs needed: None

This vehicle was maintained every 5000 Days Hours Miles

Date Removed From Service: _____

Maintenance Records: Available Not Available For Inspection

Transmission: Automatic Manual Speed Condition: Operable Needs repair Is Unknown Condition

Repairs Needed: _____

Drivetrain: 2 Wheel Drive 4 Wheel Drive Condition: _____

Exterior:

Color: WHITE

Windows: No Cracked Glass Cracked

Minor: Dents Scratches Dings

Tire Condition: GOOD

Tread: #Flat Hubcaps # _____

Major Damage to: _____

Additional Damage: _____

Decals: None Have Been Sprayed or Have been Removed & Impressions Remain No Impressions

Emergency equip: None Has been removed & There are holes in the exterior There are no holes

Interior:

Color BLUE

Cloth Vinyl Leather

Damage to Seats: DRIVER SIDE TEARS

Damage to Dash/Floor: N/A

Radio: Stock or Brand & Model: _____

AM AM/FM AM/FM Cassette AM/FM CD

AC (Condition: Cold Unknown) No AC

Air Bags: Driver's Side Dual

Cruise Control Tilt Steering Remote Mirrors Climate Control

Power: Steering Windows Door Locks Seats

Additional Equipment: H2O TANK

Manufacturer _____

Model _____

Serial # _____

Tool Box Light Bar Ladder Rack Utility Body: Brand _____

Hitch: Type _____

Location of Asset: PCT 4 Brown County Texas

For more information contact: REX TENNINGTON 817-796-1292

Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.

Vehicle Inspection Form

Inventory ID: _____	Asset Number: _____	Fair Market Value: _____
Short Description: Year <u>2008</u> Make <u>Ford</u> Model <u>F150</u>		
VIN: 1 F H P W 1 2 V 3 8 K C 4 9 8 7 1		
Title Restriction: <input type="checkbox"/> Y <input type="checkbox"/> N Odometer: 1 7 9 7 9 0 <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input checked="" type="checkbox"/> Y <input type="checkbox"/> N:		
Long Description: This Vehicle: <input type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only Engine- Type: <u>5.4</u> L, V <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid Engine Condition: <input type="checkbox"/> Runs <input checked="" type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition Repairs needed: <u>Yes</u> This vehicle was maintained every <u>5,000</u> <input type="checkbox"/> Days <input type="checkbox"/> Hours <input checked="" type="checkbox"/> Miles Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual _____ Speed Condition: <input type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition Repairs Needed: <u>NO</u> Drivetrain: <input checked="" type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____		
Exterior: Color: <u>TAN</u> Windows: <input checked="" type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked Minor: <input type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input type="checkbox"/> Dings Tire Condition: <u>GOOD</u> Tread: <input checked="" type="checkbox"/> #Flat Hubcaps # _____ Major Damage to: <u>N</u> Additional Damage: _____ Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions Emergency equip: <input type="checkbox"/> None <input type="checkbox"/> Has been removed & <input type="checkbox"/> There are holes in the exterior <input checked="" type="checkbox"/> There are no holes		
Interior: Color <u>TAN</u> <input checked="" type="checkbox"/> Cloth <input type="checkbox"/> Vinyl <input type="checkbox"/> Leather Damage to Seats: <u>DRIVER SIDE MINOR TEAR & STITCHING</u> Damage to Dash/Floor: <u>N/A</u> Radio: <input checked="" type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: _____ <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD <input type="checkbox"/> AC (Condition: <input checked="" type="checkbox"/> Cold <input type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input checked="" type="checkbox"/> Driver's Side <input type="checkbox"/> Dual <input checked="" type="checkbox"/> Cruise Control <input checked="" type="checkbox"/> Tilt Steering <input checked="" type="checkbox"/> Remote Mirrors <input type="checkbox"/> Climate Control Power: <input checked="" type="checkbox"/> Steering <input checked="" type="checkbox"/> Windows <input checked="" type="checkbox"/> Door Locks <input type="checkbox"/> Seats		
Additional Equipment: _____ Manufacturer <u>VW</u> Model _____ Serial # _____ <input checked="" type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____		
Location of Asset: <u>PCT 4 Brown County Texas</u> For more information contact: _____ Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.		

Vehicle Inspection Form

Inventory ID:	Asset Number:	Fair Market Value:
Short Description: Year <u>1996</u> Make <u>Chevrolet</u> Model <u>1 Ton</u>		
VIN: 1 6 B D C 3 4 K 0 S E 2 5 3 5 6 4 Title Restriction: <input type="checkbox"/> Y <input type="checkbox"/> N		
Odometer: 1 6 0 5 3 5 <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input type="checkbox"/> Y <input type="checkbox"/> N:		
Long Description:		
This Vehicle: <input checked="" type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only		
Engine- Type: <u>350 L, V 8</u> <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid		
Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition		
Repairs needed: _____		
This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input checked="" type="checkbox"/> Miles		
Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection		
Transmission: <input type="checkbox"/> Automatic <input checked="" type="checkbox"/> Manual <u>5</u> Speed Condition: <input checked="" type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition		
Repairs Needed: _____		
Drivetrain: <input checked="" type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____		
Exterior: Color: <u>White</u> Windows: <input type="checkbox"/> No Cracked Glass <input checked="" type="checkbox"/> Cracked <u>WINDSHIELD</u>		
Minor: <input type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input type="checkbox"/> Dings Tire Condition: <u>GOOD</u> Tread: <u>GOOD</u> // Flat Hubcaps # <u>W/A</u>		
Major Damage to: _____		
Additional Damage: _____		
Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions		
Emergency equip: <input checked="" type="checkbox"/> None <input type="checkbox"/> Has been removed & <input type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes		
Interior: Color <u>WHITE</u> <input checked="" type="checkbox"/> Cloth <input type="checkbox"/> Vinyl <input type="checkbox"/> Leather		
Damage to Seats: <u>YES - TEARS</u>		
Damage to Dash/Floor: <u>YES</u>		
Radio: <input checked="" type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: <u>DOES NOT WORK</u> <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD		
<input checked="" type="checkbox"/> AC (Condition: <input type="checkbox"/> Cold <input checked="" type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input type="checkbox"/> Driver's Side <input type="checkbox"/> Dual		
<input type="checkbox"/> Cruise Control <input type="checkbox"/> Tilt Steering <input type="checkbox"/> Remote Mirrors <input type="checkbox"/> Climate Control		
Power: <input checked="" type="checkbox"/> Steering <input type="checkbox"/> Windows <input type="checkbox"/> Door Locks <input type="checkbox"/> Seats		
Additional Equipment: <u>ELECTRIC WINCH</u>		
Manufacturer _____ Model _____ Serial # _____		
<input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input checked="" type="checkbox"/> Hitch: Type <u>TOW</u>		
Location of Asset: _____		
For more information contact: _____		
Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.		

Vehicle Inspection Form

Inventory ID: _____	Asset Number: _____	Fair Market Value: _____
Short Description: Year <u>1989</u> Make <u>Freightliner</u> Model _____		
VIN: 1 F U Y J F Y B 9 K P 3 5 6 1 5 8		
Title Restriction: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Odometer: 2 6 6 5 9 0 <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input type="checkbox"/> Y <input type="checkbox"/> N:		
Long Description: This Vehicle: <input checked="" type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input checked="" type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only Engine- Type: _____ L, V _____ <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition Repairs needed: <u>NONE</u> This vehicle was maintained every <u>5000</u> <input type="checkbox"/> Days <input type="checkbox"/> Hours <input checked="" type="checkbox"/> Miles Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection Transmission: <input type="checkbox"/> Automatic <input checked="" type="checkbox"/> Manual <u>4</u> Speed Condition: <input checked="" type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition Repairs Needed: _____ Drivetrain: <input type="checkbox"/> 2 Wheel Drive <input checked="" type="checkbox"/> 4 Wheel Drive Condition: _____		
Exterior: Color <u>RED/GREEN</u> Windows: <input type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked Minor: <input type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input type="checkbox"/> Dings Tire Condition: <u>GOOD</u> Tread: <u>600</u> #Flat Hubcaps # _____ Major Damage to: _____ Additional Damage: _____ Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions Emergency equip: <input checked="" type="checkbox"/> None <input type="checkbox"/> Has been removed & <input type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes		
Interior: Color <u>BLACK</u> <input checked="" type="checkbox"/> Cloth <input type="checkbox"/> Vinyl <input type="checkbox"/> Leather Damage to Seats: <u>GOOD</u> Damage to Dash/Floor: <u>NONE</u> Radio: <input type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: <u>NONE</u> <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD <input checked="" type="checkbox"/> AC (Condition: <input type="checkbox"/> Cold <input checked="" type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input type="checkbox"/> Driver's Side <input type="checkbox"/> Dual <input type="checkbox"/> Cruise Control <input type="checkbox"/> Tilt Steering <input type="checkbox"/> Remote Mirrors <input type="checkbox"/> Climate Control Power: <input checked="" type="checkbox"/> Steering <input type="checkbox"/> Windows <input type="checkbox"/> Door Locks <input type="checkbox"/> Seats		
Additional Equipment: _____ Manufacturer _____ Model _____ Serial # _____ <input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____		
Location of Asset: _____ For more information contact: _____ Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.		

Tractor Inspection Form

Inventory ID: _____

Asset Number _____

Fair Market Value: _____

Short Description:

Year 1999 Manufacturer New Holland Model T5100 Serial Number 123190B

Please fill in or check

Long Description:

This Equipment: Starts Starts with a Boost & Is Operable Is not operable For Parts Only

Engine L, V Gas Diesel engine Hours 5,346 Miles _____

This vehicle was maintained every 500 Hours Horse Power 100

Engine Manufacture: _____ **Condition:** Is Operable Needs repair Is in Unknown Condition

Repairs needed: New Engine

Date Removed From Service: _____ Maintenance Records: Available Not Available For Inspection

Transmission

Transmission: Automatic Manual _____ Speed Transmission: Hours _____ Miles _____

Transmission Manufacture: _____ **Condition:** Is Operable Needs Repair Is Unknown

Drivetrain OK Repairs Needed: None

Attachments & Additional Equipment

Backhoe Front End Loader PTO Drive 3 Point Hitch Other: Brush Shredder

Mowing Deck: Manufacture: ALAMO Model: 05214 Type: A-Boom Size: _____

Deck Condition: Operable Not Operable & Damage: _____

Other Equipment: Manufacturer _____ Model _____
Serial # _____ Condition: Is Operable Needs repair Is in Unknown Condition

Description: _____

Exterior: Color YELLOW **Windows:** No cracked glass Cracked _____

Minor Dents Scratches Dings **Tire Condition:** Low Flat 1

Minor dents to: _____

Major damage to: _____

Dimensions: _____

Decals: None Have been sprayed Have been removed Impressions remain No impressions

Interior: Color Grey Cloth Vinyl Leather

Damage to: _____

Radio: Brand _____ AM AM/FM AM/FM Cassette AM/FM CD

Cruise Control Power: Steering Seats AC No AC Condition: Cold Unknown

Location of Asset: _____

For more information contact: _____