

Parts Department Evaluation Form

Dealership Phone Number \_\_\_\_\_

Contact Name \_\_\_\_\_

Manufacture Line/s \_\_\_\_\_

Please complete separate PDE forms for each Manufacturer line carried for detailed PDE's.

Reporting Period (12 Months) From \_\_\_\_\_ 20\_\_ To \_\_\_\_\_ 20\_\_

1. Average Inventory Value \$ \_\_\_\_\_  
Total inventory values from twelve month-end reports, then divide by twelve.

2. Average Gross Profit Percentage \_\_\_\_\_%

3. Total Gross Profit \$ \_\_\_\_\_

4. Total Sales \$ \_\_\_\_\_

5. Inventory Profile NMN \_\_\_\_\_ 0-3MNS \_\_\_\_\_ 4-6MNS \_\_\_\_\_

7-9MNS \_\_\_\_\_ 10-12MNS \_\_\_\_\_ 12+MNS \_\_\_\_\_

If your management report indicates different time increments, please scratch and change. Report profile from final month of reporting period only.

6. Policy Stock/Replenish Orders Weekly \_\_\_\_\_ Daily \_\_\_\_\_

If weekly, your stock order percentage \_\_\_\_\_%

Manufacture returns Monthly \_\_\_\_\_ Yearly \_\_\_\_\_

Bi-yearly \_\_\_\_\_ Other \_\_\_\_\_ If Other, please explain...

7. Proximity From the Manufacture's parts depot \_\_\_\_\_ KMS/MILES

To the closest dealership with same car line \_\_\_\_\_ KMS/MILES

8. LGPR Total payroll of Parts Department employees only \_\_\_\_\_