

# Heavy Vehicle Specialist Certificate

Must be presented to a Transport Service Delivery Agent  
Heavy Vehicle Specialist Inspector and Inspecting Organisation

Heavy Vehicle Specialist Inspector's or Manufacturing Inspecting Organisation's Name (PRINT IN CAPS) **WAYNE COOPER** ID **WC**

Vehicle Registration: \_\_\_\_\_ VIN/Chassis Number **7 A 9 E 2 5 0 1 7 E 1 0 2 3 2 5 5**

Component being certified:

Chassis Modification  Load Anchorage  Log Bolsters

Towing Connection  Brakes  SRT

Certification Category **HVEC**

PSV Stability  PSV Rollover  Swept Path

PBS

Description of Work

**NEW LIVESTOCK TRAILER CHASSIS MANUFACTURED AND ASSEMBLED BY DOMETTS.**

Code/Standard/Rule Certified to **RULE 31002** Component Load Rating(s) **CHASSIS GVM 32,000kg**

General Drawing Number(s) **3048-30 C-D2001 & D-21B** **AXLE RATING 8,000kg**

**SUSPENSION RATING 8,000kg**

Supporting Documents **MATRIX CALCULATIONS 4-CSM-008, 1943-49 AND 1943-09**

Special Conditions\*

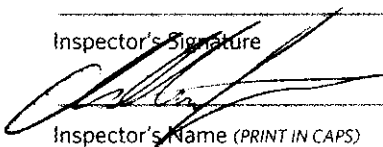
THIS CERTIFICATE IS A STATEMENT OF COMPLIANCE AT THE TIME OF CERTIFICATION ONLY AND DOES NOT OFFER OR IMPLY ANY GUARANTEE OR WARRANTY WITH RESPECT TO THE WORK CERTIFIED OR ANY OTHER ASPECT OF THIS VEHICLE. COMPONENT/VEHICLE IS TO BE RE-INSPECTED BY A LAND TRANSPORT NZ APPROVED HEAVY VEHICLE SPECIALIST CERTIFIER ON OR BEFORE THE CERTIFICATION EXPIRY DATE STATED.

Certification Expiry Date (if applicable) **24-04-2024** or Hubodometer Reading (whichever comes first) \_\_\_\_\_

**Declaration**

I the undersigned, declare that I am the Heavy Vehicle Specialist Inspector identified and I hold a current valid appointment. I certify that the above mentioned vehicle component's design, manufacture and installation, and this certification complies in all respects with the Land Transport Rule: Vehicle Standards Compliance 2002 and my Appointment. To the best of my knowledge the information contained in the Certificate is true and correct.

Designer's ID (if different from inspector below) \_\_\_\_\_

Inspector's Signature 

Inspector's Name (PRINT IN CAPS) \_\_\_\_\_ ID Number \_\_\_\_\_

Date **24-04-2014** Number **469596**

CoF Vehicle Inspector ID \_\_\_\_\_ CoF Vehicle Inspector Signature \_\_\_\_\_ Date \_\_\_\_\_

All fields including those marked with \* must be completed before this certificate can be accepted.