

Heavy Vehicle Specialist Certificate

Must be presented to a CoF (Heavy) Inspecting Organisation
Heavy Vehicle Specialist Inspector and Inspecting Organisation

Heavy Vehicle Specialist Inspector's or Manufacturing Inspecting Organisation's Name (PRINT IN CAPS) **Chris Clarke** ID **CJC**

Vehicle Registration* _____ VIN/Chassis Number **7A9D70011F1023376**

Component being certified:

<input type="checkbox"/> Chassis Modification	<input type="checkbox"/> Load Anchorage	<input type="checkbox"/> Log Bolsters
<input type="checkbox"/> Towing Connection	<input checked="" type="checkbox"/> Brakes	<input type="checkbox"/> SRT
<input type="checkbox"/> PSV Stability	<input type="checkbox"/> PSV Rollover	<input type="checkbox"/> Swept Path
<input type="checkbox"/> PBS		

Certification Category
HVEK

Description of Work

CERTIFY TO SCHEDULE 5

ROLL STABILTY FUNCTION ACTIVATED

Code/Standard/Rule Certified to **HVBR 32015/3 Schedule 5** Component Load Rating(s) **28000KG**

General Drawing Number(s) **N/A**

Supporting Documents
BRAKE RULE CERTIFICATE - CJC152944


Special Conditions*
WARNING LAMP MUST ILLUMINATE WHEN IGNITION IS SWITCHED ON & THEN EXTINGUISH IMMEDIATELY OR WHEN VEHICLE SPEED EXCEEDS 7 KPH

Certification Expiry Date (if applicable) **N/A** 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) **CHRIS CLARKE** ID Number **CJC**

Date **24-Feb-15** Number **501594**

CoF Vehicle Inspector ID _____ CoF Vehicle Inspector Signature _____ Date _____

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