

Heavy vehicle specialist certificate

Must be presented to a CoF (heavy) inspecting organisation if not entered into LANDATA

					ID			
Heavy vehicle specialist inspector's or manufacturing	GEORGE BARBOUR				GRB4			
Vehicle registration (optional)	VIN/chassis numbe							
venicie registration (optional)		2 0 0	11K	1 0	2 3	9 0	8	
Make 2019 DOMETT	Component being	certified:	Chassis			Load ancl	norage	
Model (optional) E2001 PH	Log bolsters \sqrt{\sqrt{\text{Towing connection}}}							
Certification category HVET	SRT Swept path		PSV stability	,		PSV rollo	ver	
Description of work				***************************************				
NEW DRAWBAR MANUFAC	TURED AND	FITTE	D BY DOM	IETT.				
Code/standard/rule certified to			nt load rating(s)					
NZS 5446:2007	ZS 5446:2007 MTM 35,000kg							
General drawing number(s) 6142-02 DSA01211-D LENGTH: 1850mm COUPLING D VALU					- /B #IB I	4471		
6142-02 DSA012	11-D	COL	JPLING D	VALUE	= (IVIIIN)) 14/K	IN	
PROMECH CALCULATIONS 4-DBR-021. Special conditions (optional) 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 AN NZTA APPROVED HEAVY VEHICLE SPECIALIST CERTIFIER ON OR BEFORE THE CERTIFICATION EXPIRY DATE STATED. THIS CERTIFICATION IS NULL & VOID IF VEHICLE/COMPONENT IS SUBSEQUENTLY MODIFIED, ACCIDENT DAMAGED, OR RE-CERTIFIED.								
Certification expiry date (if applicable) 27-11-2029	or	Hubodom	eter reading (which	ever comes fir	rst)			
Declaration I the undersigned, declare that I am the heavy vehice inspector identified and I hold a current valid appropriate that the above mentioned vehicle componer manufacture and installation, and this certification in all respects with the Land Transport Rule: Vehicle Compliance 2002 and my appointment. To the knowledge the information contained in the certificant correct.	pointment. I ent's design, on complies de Standards best of my	Inspector Inspector GEO Date	is ID (if different from in is name (PRINT IN COUNTY) DRGE BARBO	OUR Numb	<u></u>	ID num R B	ber 4	
CoF vehicle inspector ID (if applicable)	CoF vehicle inspecto	or signature	(if applicable)	Date				

All fields are mandatory unless otherwise stated.

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