

03917918

PERIODIC MANDATORY VEHICLE
INSPECTION CERTIFICATEManitoba  mob-1Vehicle Standards and Inspections
Box 45064 Regent Postal
Winnipeg, MB, R2C 5G7
1-204-985-0920Manitoba 

A910054

| | | |
|--|---|--|
| Date Inspection Started DAY MO. YR. 27 03 25 | Station Number 1111 | Station Name City |
| Date Inspection Completed DAY MO. YR. 31 03 26 | Mechanic Number 1111 | Mechanic Signature Station Phone Number |
| Inspection Expiry Date DAY MO. YR. 31 03 26 | Vehicle Owner WPG MB | Address City Province Postal Code Phone |
| <input checked="" type="checkbox"/> Pass/Safe Vehicle <input type="checkbox"/> Fail/Unsafe Vehicle <input type="checkbox"/> Fail/Hazardous | Licence Number Prov. NSC # Vehicle Identification Number 4G047E1B77E426082 <input checked="" type="checkbox"/> Confirmed legible Vehicle Identification Number on vehicle | Odometer Reading 242673 Odom. Type km ml Make Model Year Unit # 2MC Pump 200 |

THE FACILITY AND INSPECTOR MUST BOTH BE AUTHORIZED FOR CLASS OF VEHICLE INSPECTED

☒ Truck ☐ GVWR ☐ KGS ☐ Truck Tractor ☐ Trailer ☐ Semi-Trailer ☐ Bus ☐ School Bus ☐ Coach Bus

List of applicable items to be inspected is in the Table of Contents of National Safety Code Standard 11 Part B

| P | R | Mark "X" under "R" when item Rejected "XX" under "R" when item Hazardous "X" under "P" when item Corrected or No Defects found in Section | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| X | | Section 1 - Power Train: Defects (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X | | Section 2 Suspension: Defects (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Section 3 - Brake Systems: 3H 3A Defects (if any) Circle Brake Type | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Brake Inspection Type: A B C D E Circle appropriate letter for Internal Brake Component Inspection | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <table border="1"><thead><tr><th rowspan="2">Axle</th><th colspan="2">Lining</th><th colspan="2">Drum/Rotor</th><th colspan="2">Stroke</th></tr><tr><th>L</th><th>R</th><th>L</th><th>R</th><th>L</th><th>R</th></tr></thead><tbody><tr><td>1</td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>2</td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>3</td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>4</td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>5</td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="7">Final Measurement</td></tr></tbody></table> | Axle | Lining | | Drum/Rotor | | Stroke | | L | R | L | R | L | R | 1 | | | | | | | 2 | | | | | | | 3 | | | | | | | 4 | | | | | | | 5 | | | | | | | Final Measurement | | | | | | | | | | | | | | | | | | | | | | |
| Axle | Lining | | | Drum/Rotor | | Stroke | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | L | R | L | R | L | R | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Final Measurement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Section 4 - Steering: Defects (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Section 5 - Instruments & Auxiliary Equipment: Defects (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Section 6 - Lamps: Defects (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Section 7 - Electrical System: Defects (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Section 8 - Body: Defects (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Section 9 - Tire & Wheel: Defects (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <table border="1"><thead><tr><th rowspan="2">Axle</th><th colspan="4">Tread Depth</th><th colspan="4">Air Pressure</th></tr><tr><th colspan="2">Initial</th><th colspan="2">Corrected</th><th colspan="2">Initial</th><th colspan="2">Corrected</th></tr><tr><th></th><th>L</th><th>R</th><th>L</th><th>R</th><th>L</th><th>R</th><th>L</th><th>R</th></tr></thead><tbody><tr><td>1</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>2</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>3</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>4</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>5</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table> | Axle | Tread Depth | | | | Air Pressure | | | | Initial | | Corrected | | Initial | | Corrected | | | L | R | L | R | L | R | L | R | 1 | | | | | | | | | 2 | | | | | | | | | 3 | | | | | | | | | 4 | | | | | | | | | 5 | | | | | | | | |
| Axle | Tread Depth | | | | Air Pressure | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Initial | | Corrected | | Initial | | Corrected | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | L | R | L | R | L | R | L | R | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | Section 10 - Coupling Devices: Defects (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

- THIS INSPECTION IS NOT A WARRANTY -

This inspection addresses standards of safety and repair that a vehicle must meet as prescribed by the Vehicle Safety Inspection Regulation but does not guarantee these components will comply with the standards for any unspecified future period of time.

Remarks:

I am aware that the above-noted vehicle is unsafe to be operated on a highway until repairs or adjustments have been made to restore it to safe condition and an inspection mechanic has re-inspected the vehicle. Operating a vehicle with a Hazardous defect may result in further enforcement action if confirmed by a Peace Officer. If this vehicle is not returned within 14 days for re-inspection a complete inspection will be required.

Vehicle received without repairs by:

Signature

Date: