PERIODIC MANDATORY VEHICLE INSPECTION CERTIFICATE

Manitoba 🦬

Box 45064 Regent Postal Outlet
Winnipeg, MB, R2C 5C7
1-204-985-0920

Manitoba 🦬

A834611

	DAY	MO.	YR.
Date Inspection Started	28	05	24
Date Inspection Completed	28	05	24
Inspection Expiry Date	31	05	25

Station Number A6007 Northline Service
Station Name | **City** 204 343 3925

Mechanic Number M7944 *(Mechanic Signature)*
Mechanic Signature | **Station Phone Number**

Vehicle Owner D.M.G. Transport Ltd.

Address | **City** | **Province** | **Postal Code** | **Phone**

- [✓] Pass/Safe Vehicle
- [ ] Fail/Unsafe Vehicle
- [ ] Fail/Hazardous

Licence Number NO PLATE   **Prov.** ____   **NSC #** ____   **Odometer Reading** 1447408   **Odom. Type** [✓] km [ ] mi

Vehicle Identification Number SKJJBHD57GLHL1980   **Make** W/S   **Model** S700   **Year** 16   **Unit #** ____

[✓] Confirmed legible Vehicle Identification Number on vehicle

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
✓		**Section 1 - Power Train:** Defects (if any)
✓		**Section 2 Suspension:** Defects (if any)
X	X	**Section 3 - Brake Systems:** 3H 3A Defects (if any) Circle Brake Type RFD dust cover loose RFD maxi pot spring broken
✓		**Section 4 - Steering:** Defects (if any)
✓		**Section 5 - Instruments & Auxiliary Equipment:** Defects (if any)
X	X	**Section 6 - Lamps:** Defects (if any) Marker lights out
✓		**Section 7 - Electrical System:** Defects (if any)
X	X	**Section 8 - Body:** Defects (if any) Drivers side step loose
X	X	**Section 9 - Tire & Wheel:** Defects (if any) RFD inner cap outer sidewall cracked, low tire pressures
X	X	**Section 10 - Coupling Devices:** Defects (if any) Glad hand rubbers worn

Brake Inspection Type: (A) B C D E   Circle appropriate Letter for Internal Brake Component Inspection

Axle	Lining L	Lining R	Drum/Rotor L	Drum/Rotor R	Stroke L	Stroke R
1	7/8	7/8	16.525	16.529	1.25"	1.25"
2	3/4	3/4	16.53	16.53	1.5"	1.5"
3	3/4	3/4	16.53	16.53	1.5"	1.5"
4						
5						
	Final Measurement					

	Tread Depth				Air Pressure			
	Initial		Corrected		Initial		Corrected	
Axle	L	R	L	R	L	R	L	R
1	8	8			90	100	100	
2	19 18	8 8		12 9	60 75	30 70	100 100	100 100
3	15 14	15 16			75 75	70 70	100 100	100 100
4								
5								

- 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