



**CERTIFICATE NUMBER**

**Commercial Vehicle Inspection Certificate  
Traffic Safety Act**

**PART 1 - VEHICLE OWNER AND VEHICLE  
IDENTIFICATION**

|                                       |                                 |                              |         |
|---------------------------------------|---------------------------------|------------------------------|---------|
| <b>Vehicle Type:</b>                  | Trailer                         | <b>Seating Capacity:</b>     |         |
| <b>GVW:</b>                           | kg                              | <b>Brake Type:</b>           | Air     |
| <b>Owner Name:</b>                    | CONTINENTAL SALES & RENTALS LTD |                              |         |
| <b>Address:</b>                       | 305-71 BOULDER BLVD             |                              |         |
| <b>City:</b>                          | STONY PLAIN                     | <b>Province:</b>             | AB      |
|                                       |                                 | <b>Postal Code:</b>          | T7Z 1V6 |
| <b>Telephone Number:</b>              | (000) 000-0000                  |                              |         |
| <b>Vehicle Identification Number:</b> | 2LDSD5338LG068715               |                              |         |
| <b>Make:</b>                          | Lode King                       | <b>Model:</b>                | SDG53-3 |
| <b>Year:</b>                          | 2020                            | <b>Unit Number:</b>          | EZ-108  |
| <b>Odometer:</b>                      | KM                              | <b>Licence Plate Number:</b> | 5VX644  |
|                                       |                                 | <b>Province:</b>             | AB      |

**IT IS AN OFFENCE TO FALSIFY AN INSPECTION CERTIFICATE**

**PART 2 - CERTIFICATION**

I certify the vehicle described in Part 1 has passed the inspections and tests established under the Traffic Safety Act for a Commercial Vehicle.

|   |                           |
|---|---------------------------|
| <b>Inspection Facility Name:</b>        | <b>Facility Number:</b>   |
| Extreme HD Inc.                         | 21283                     |
| <b>Inspection Technician Name:</b>      | <b>Technician Number:</b> |
| Dale Duiker                             | C4291                     |
| <b>Inspection Technician Signature:</b> |                           |
| <b>Inspection Date:</b>                 | 2025/08/06                |