



CERTIFICATE NUMBER

Commercial Vehicle Inspection Certificate Traffic Safety Act

PART 1 - VEHICLE OWNER AND VEHICLE IDENTIFICATION

Vehicle Type:		Trailer			Seating Capacity:					V			
GVW:		kg			Brake Type:				Air				
Owner Name:		VOS TRANSPORT LTD											
Address:	PO	PO BOX 445											
City:	GR	RANUM F			rovince:	rince: AB				Postal Code:		T0L1A0	
Telephone	Num	nber:	(403) 330)-3871									
Vehicle Identification Number:				1GRAA0627CB700543									
Make:	Great Dar	ne				Мо	del: he	ater v	an				
Year:		2012				Unit Num		it Numl	mber:		VNH1745		
Odometer:		KM Li		Licer	icence Plate Number		r:	6UX499			Provinc	e:	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.

Inspection Facility Name:	Facility Number:				
A.S.A.P Truck & Trailer Rep	13437				
Inspection Technician Name);	Technician Number:			
James Johnston	C9515				
Inspection Technician Signa	ature:	Jame Streets			
Inspection Date:	2024/12/19				