V13-2





### **CERTIFICATE NUMBER**

# Commercial Vehicle Inspection Certificate Traffic Safety Act

## PART 1 - VEHICLE OWNER AND VEHICLE IDENTIFICATION

Vehicle Type:		Trailer		Seating Capa			acity:	y:					
GVW:		kg			Brake Type:			Air	Air			N	
Owner Name: 601391 ALBERTA L				TD.									
Address:	ss: PO BOX 72032												
City:	EDN	EDMONTON			Province: AB			Postal Code: T6B-3A7				-3A7	
Telephone	Num	ber: (780) 46	67-888	30									
Vehicle Identification Number:				1TKA0533XFM016675									
Make: Trail King							Model: Slide Axle						
Year:	2	2015					Unit Number:			3101			
Odometer:	-	KM Licence Plate Nu				umber	r: 4XX317			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:			
Pioneer Truck Lines Ltd.	18279			
Inspection Technician Name:	Technician Number:			
Shayne Harper		C4762		
Inspection Technician Signature:		Johns Hom		
Inspection Date:	2025/11/28	77 77		

