



**Commercial Vehicle Inspection Certificate
Traffic Safety Act**

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

Vehicle Type:	Trailer	Seating Capacity:	
GVW:	kg	Brake Type:	Air
Owner Name:	FROZEN SOLID LTD		
Address:	37 DRAKE LANDING RIDGE		
City:	OKOTOKS	Province:	AB
		Postal Code:	T1S0C2
Telephone Number:	(587) 620-0146		
Vehicle Identification Number:	1JJV533B8LL228666		
Make:	Wabash	Model:	RFALHSA
Year:	2020	Unit Number:	TRI 705
Odometer:	KM	Licence Plate Number:	6HZ735
		Province:	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:
Gateway Trailer Repairs Ltd.	20436
Inspection Technician Name:	Technician Number:
Joshua Ross	C8088
Inspection Technician Signature:	
Inspection Date:	2025/10/28

01-11-10

GOVERNMENT OF CANADA	
Ministry of Health	
Health Canada	
Form 1001 (Rev. 1999)	
Name of patient	
Date of birth	
Sex	
Address	
City	
Province	
Postal code	
Telephone	
Fax	
E-mail	
Signature of patient	
Signature of doctor	
Date	

Ministry of Health	
Health Canada	
Form 1002 (Rev. 1999)	
Name of patient	
Date of birth	
Sex	
Address	
City	
Province	
Postal code	
Telephone	
Fax	
E-mail	
Signature of patient	
Signature of doctor	
Date	

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