



**Commercial Vehicle Inspection Certificate
Traffic Safety Act**

C44-13

PART 1 - VEHICLE OWNER AND VEHICLE IDENTIFICATION

Vehicle Type:	Trailer	Seating Capacity:	
GVW:	kg	Brake Type:	Air
Owner Name:	SMITH TRUCKING SERVICE LTD		
Address:	PO BOX 686		
City:	BROOKS	Province:	AB
		Postal Code:	T1R1B6
Telephone Number:	(403) 362-4071		
Vehicle Identification Number:	2S9PA8473FW134865		
Make:	Trout River	Model:	Live Bottom
Year:	2015	Unit Number:	
Odometer:	KM	Licence Plate Number:	6MK616
		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:	Crosstown Truck & Tire (Brooks) Ltd.	Facility Number:	10838
Inspection Technician Name:	Leigh Oliver	Technician Number:	B2681
Inspection Technician Signature:			
Inspection Date:	2026/04/15		