

SELF SCRUTINY OF VEHICLE SAFETY

MotorSport Back in Motion

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With the current Government guidelines surrounding COVID-19 and Social Distancing, it may not always be appropriate motorsport.org.nz for a Scrutineer to complete a physical Safety Audit on your vehicle prior to competition commencing. This form needs to accompany your Event Entry and an image of your last three event entries in your MotorSport New Zealand Log Book.

EVENT DETAILS	
Event: Event	Туре:
Event Organiser:	Venue:
Competitor Name:	Date:
VEHICLE DETAILS	
Competition Number: Logbook Number:	Class / Group:
Schedule: A / AA (circle one) Certificate of Description Number (applies to Schedule AA only):	
Vehicle Make:	Model: Year:
COMPETITOR CHECKLIST please tick (all boxes must be filled. Draw a line through any non-applicable items)	
Vehicle Safety Checklist	Driver Apparel Checklist
Safety Harness – Art 4.4	Protective Helmet – Art 4.1
Window Nets – Art 4.5	Frontal Head Restraints – Art 4.2
Safety Structure – Art 4.6	Protective Clothing – Art 4.3
Seating – Art 4.7	Safety Harness – Art 4.4
Fire Extinguisher – Art 4.8	Road Registered Vehicles
Wheels & Tyres – Art 4.9	Authority Card Expiry
Braking System – Art 4.10	Road Licencing & valid WOF
Steering and Suspension – Art 4.11	
Engine and Transmission – Art 5.1	Rally Vehicles
Exhaust System – Art 5.2	First Aid Kit – Art 7.1(2)
Service Fluid Lines – Art 5.3	Safety Triangle – Art 7.1(3)
Electrical System – Art 5.4	Emergency SOS Card – Art 7.1(5)
Battery / Lighting / Wiring – Art 5.5 – 5.7	RallySafe System – Art 7.1(5)
Chassis / Body / Exterior – Art 5.8 – 5.13	Mudflaps / Tow Rope – Art 7.2(1) (2)
	Aux Headlamps – Art 7.2(5)

In signing this declaration I state that the vehicle detailed on this form fully complies with the relevant safety items indicated above and with any further safety or eligibility requirements as detailed in the NSC, any Accredited Articles or regulations, any Supplementary Regulations and approved Bulletins.

Competitor Name:______ Licence Number:______

Signature:

_____ Date: _____