Tech Inspection Form

EVENT DATE _____ DRIVER NAME_____
CAR MAKE_____MODEL_____YEAR_____CAR NUMBER_____

INSTRUCTIONS (Read carefully):
This Inspection checklist is to be completed PRIOR or the event, present to event staff for verification at your arrival. This is for your safety, and to ensure a smooth event for all involved. Please contact event staff with any questions prior to the event date.

WHEELS & TIRES _____Tire Condition _____All lug nuts securely installed _____No Hubcaps	BRAKES _____pedal pressure _____fluid level _____lines (condition) _____brake lights
STEERING & SUSPENSION _____wheel bearings-front _____wheel bearings-rear _____steering play	SAFETY EQUIPMENT _____roll bars in open cars _____seat belts or harness _____helmet (Snell 95 or newer) _____covered/sealed battery inside cockpit
ENGINE _____fluid leaks (oil, fuel, water) _____radiator overflow _____radiator hoses (condition) _____battery secured (no bungees)	MISCELLANEOUS _____Gas cap secured _____No wires exposed _____Seats bolted tight _____Coolant drained and filled with water (Water Wetter optional)

HAVE READY AT TRACK:
-No loose objects in car or trunk. Remove spare tire, jack, floor mats, dash mats, paper, etc.

OWNER SIGNATURE:

_____DATE_____

I have inspected this vehicle for items above.

INSPECTOR SIGNATURE OR STAMP:_____DATE_____