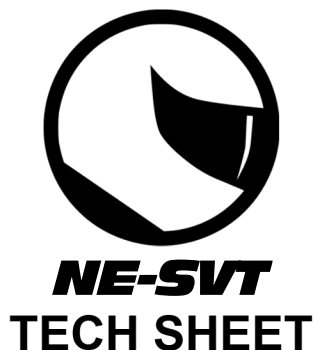




Please complete this sheet and bring it with you to Check-In prior to your first run.

Driver: _____ Run Group: _____

Car Make: _____ Model: _____ Color: _____ Year: _____

Helmet Certification and Year: _____

The entrant/participant is responsible for the safety of his/her vehicle. Neither the tech inspectors, the event organizers, nor the sanctioning body will be held responsible for the safety of this vehicle. Have a qualified mechanic check over your car and make certain everything is in good working order for an event such as this.

DRIVER SAFETY

- _____ Helmet (2015 or newer: Snell M/SA, SFI, FIA)
- _____ Current NE-SVT Helmet tech sticker (obtained by presenting approved helmet at check in)
- _____ Shoes must be solid, closed toe, and in reasonable condition
- _____ Seatbelts/Harness must be in good condition
- _____ A Proper ROLLBAR (when it is required)
- _____ Rollbar padding (when it is required)
- _____ Seats bolted securely
- _____ Interior & trunk clear of loose items; all floor mats removed

BRAKES

- _____ Pads are less than half worn
- _____ Fluid is clear, reservoir is full (DOT 4 recommended)
- _____ Pedal is firm
- _____ All brake lights are working
- _____ Master cylinder/calipers are not leaking
- _____ Rotors have no cracks or discoloration

TIRES & WHEELS

- _____ Adequate tire tread, speed rating, good condition
- _____ All lug nuts present & torqued to spec.
- _____ Hubcaps removed
- _____ Wheels - No cracks or structural damage

SUSPENSION & STEERING

- _____ Wheel bearings - no play
- _____ Ball joints in good condition
- _____ No excessive steering play
- _____ Shocks - no leaking

ENGINE & DRIVE TRAIN

- _____ Check all fluid levels, belts, and hoses. Tighten all caps and secure all hoses.
- _____ No fluid leaks (oil, transmission, fuel, water)
- _____ Battery secured (no bungees)
- _____ Battery terminals covered
- _____ Overflow containers present
- _____ Exhaust system functional (may have to meet sound restrictions)
- _____ Throttle has quick, positive return
- _____ Fuel cap tightened

OTHER

- _____ No severe glass cracks
- _____ Windshield wipers function properly
- _____ Outside & Rear View mirrors
- _____ Video Camera/Recording device securely mounted (if applicable)

I, _____, have inspected all of the above on my vehicle.

Signature _____ Date _____