

Certificate Of Roadworthiness

Road Safety (Vehicles) Regulations 1999, Victoria

Serial X **581451**

TESTER'S LICENCE NUMBER EX **8132HVLV**

Original - Green - To be handed to person presenting vehicle for inspection.
Duplicate - Pink - Rejection copy
Triplicate - White - Book Copy

A WARNING - Any alteration makes this certificate invalid

Vehicle Description

Registration Number	<i>No Rego</i>	Year	<i>1955</i>	Make	<i>Ford</i>
Model	<i>Mainline</i>	Colour	<i>Red</i>	Type	<i>utility</i>
VIN/Chassis Number	<i>B 5 6 7 5 0 2 G</i>				
Engine Number	<i>5H63XY52219K</i>				

Signature of Licensed Tester OR Signature of Person authorised to give a certificate on behalf of Licensed Tester

[Signature]

Print Name
Archie Robertson

Date (to be written) in words
Twenty Fifth July 2007

Telephone
0408373536

I the undersigned certify that I have caused the vehicle referred to in this Certificate to be examined and tested in accordance with the written directions given by the Roads Corporation and having regard to that examination and test do further certify that the vehicle complies with regulatory requirements including written directions given by VicRoads as to its construction and equipment, and that the vehicle is safe to be used on a highway. I so certify in the knowledge that this Certificate is current and can be used for a transaction for a period of 30 days from the date of its issue.

ARCHIE ROBERTSON M.I.A.M.E.
Auto and Marine Services
E/4, 15 Edelmaier Street
Bayswater 3153
Ph: 0408 373 536
VASS B006 LVT8132 HVLV
A.B.N. 25 938 586 093

Address at which test conducted

B Test Report (Purchaser's Copy)

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WARNING - This is not an assessment of the overall condition of the vehicle (See rear side for further information)

Registered Number/VIN	<i>B567502G</i>	Tester's Licence Number EX	<i>8132HVLV</i>
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Examined and Tested for (name of person presenting vehicle)

Name
Mr David Pratt

Privacy statement on rear of form.

Address
[Redacted]

Contact Phone No. () *97005881*

Do not write in this space

Date of First Test	<i>25-7-07</i>	Time of First Test	<i>10:30</i>	AM PM	Date of Second Test	Time of Second Test	AM PM
Odometer Reading	<i>49293</i>			Odometer Reading			
Signature of examining mechanic conducting test				Signature of examining mechanic conducting test			

1st	Tests	2nd	List Defects Found
<input checked="" type="checkbox"/>	Wheels and Tyres	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Steering and Suspension	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Brakes	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Brake Performance	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Service Brake <i>667</i> %	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Parking Brake	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Seats and Seat Belts	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Lamps, Signals, Reflectors etc	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Exhaust and Emission Controls	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Windscreen and Windows	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Windscreen Wipers, Washers, etc	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Body and Chassis	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Engine and Driveline	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Other Items	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Modifications <i>VASS B0060385-</i>	<input type="checkbox"/>	

[Signature]