

# Vehicle Check List

Registration #	personal	Owners Details	WOOD MULCHING INDUSTRIES P/L
Inspection Type	PROGRAMMED INSPECTION (OTHER)	L 1 SE 5 10 BURNSIDE RD, ORMEAU, QLD 4208	
Inspection Date	08/11/2016		
Inspection Time	06:45	Make & Model	MACK GRANITE
Odometer	793 229	VIN #	6FMN12H02CD803251
Inspection Site	Logan City VID	Rego Expiry	01/05/2017
Purpose of Use	COML	Colour	WHI
Number of Trailers	1	GVM / ATM	24500
COI Expiry Date		EOT Expiry Date	
Vehicle Message			

Tick Appropriate Box - Cross out if Not Applicable

Item	Pass	Fail	Item	Pass	Fail
<b>Electrical</b>			<b>Braking</b>		
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Method of Testing</b>		
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pass %	Fail %	Rollers
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27	Service Brake	69
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	28	Park Brake	16
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	29	Brake Report Attached	Yes
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	I have inspected items to Int Id#		
<b>Glazing</b>			<b>Steering</b>		
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Method of Testing</b>		
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plates	Raised	Visual
<b>Seat / Seat Belts</b>			30	King Pins / Wheel Bearings	<input checked="" type="checkbox"/>
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	31	Arms / Linkages / Wheel	<input checked="" type="checkbox"/>
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	32	Steering Box / Pitman Arm	<input checked="" type="checkbox"/>
<b>Mud Guards / Mud Flaps</b>			33	Free Play / Seals	<input checked="" type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Suspension</b>		
<b>Wheels / Tyres</b>			Plates	Raised	Visual
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	34	Springs	<input checked="" type="checkbox"/>
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	35	Hangers / Pins / Bushes	<input checked="" type="checkbox"/>
<b>Body / Fittings / Protrusions</b>			36	Air Bags / Air Suspension	<input checked="" type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	37	Shock Absorbers	<input checked="" type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	38	Axles / Cross Members	<input checked="" type="checkbox"/>
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Oil / Fuel Leaks</b>		
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	39	Engine / Driveline	<input checked="" type="checkbox"/>
<b>PT Requirements</b>			40	Steering / Accessories	<input checked="" type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Exhaust</b>		
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	41	Leaks / Design / Security	<input checked="" type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	42	Emissions	<input checked="" type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Mounting</b>		
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	43	Engine / Transmission / Body / Driveshaft	<input checked="" type="checkbox"/>
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Air Systems</b>		
<b>Tow Couplings</b>			44	Leaks / Low Air / Contamination	<input checked="" type="checkbox"/>
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	45	Breakaway / Protection Value	<input checked="" type="checkbox"/>
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Under Body / Chassis</b>		
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	46	Cracks / Security / Design / Corrosion	<input checked="" type="checkbox"/>
<b>I have inspected items to Int Id#</b>			<b>Modifications</b>		
<b>Label / Sticker #</b>			47	Fitting / Identification	<input checked="" type="checkbox"/>
<b>Comments:</b>			<b>I have inspected items to Int Id#</b>		
NEW TRES quick W L MM TIME WAS BEST WZ WAS SHOCK AREA NO 3 LNS TONY " " " " " "					
The Authorised Officer/s completing this checklist must sign below					
I authorise a COI/DN to be issued to this vehicle. Signature:			Inspector ID Number 247		
I authorise a COI/DN to be issued to this vehicle. Signature:			Inspector ID Number		



Name/Co.:  
Street:  
Zip code, city:  
Telephone:  
Test date: 08/11/2016  
Time time: 6:44

Semi-tractor  
License pl. no.: **persona**  
Mileage:  
Init.reg.:  
Vehicle manuf.:  
Vehicle type:  
Veh. chassis no.:  
number of axles: 3

# MAHA TOTAL PRINT OUT

## BRAKE TEST

### Brake test tractor

	Roller res. [kN]		Brake force [kN]			Imbalance: [%]	Ovality [kN]		Deceleration: [%]		weight [t]		Pedal [N]	Pressure [bar]	
	Left	Right	Left	Right	Axle		Left	Right	sta	dyn	sta	dyn		Pm	Px
1. SB	0.48	0.50	15.58	15.31	30.89	2	---	---	146	62	2.15	5.06	---	---	---
2. SB	0.38	0.40	7.79	8.36	16.15	7	---	---	50	71	3.32	2.33	---	---	---
3. PB	0.31	0.44	4.91	4.28	9.19	13	---	---	28	31	3.29	3.00	---	---	---
3. SB	0.36	0.34	9.49	10.09	19.58	6	---	---	63	82	3.19	2.44	---	---	---
3. PB	0.30	0.36	8.73	7.37	16.10	16	---	---	52	58	3.18	2.84	---	---	---

### Final Evaluation veh 1

Service brake system (SB)	Max. brake force: [kN]	Imbalance [%]	Decl. static: [%]	Decl. dynamic: [%]
Parking brake system (PB)	66.62	7	78	69
Static weight: 8.66 t	25.29	16	30	26
		Dynamic weight:	9.83 t	

Inspector:

Signature: .....

Machine No. 5905

Next Calibration due 11.04.2017

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# Vehicle Check List

Registration #	persona	Owners Details	WOOD MULCHING INDUSTRIES P/L
Inspection Type	PROGRAMMED INSPECTION (OTHER)	SHOP 1B 13 BRENDAN DR, NERANG, QLD 4211	
Inspection Date	27/11/2018		
Inspection Time	08:15	Make & Model	MACK GRANITE
Odometer	491832	VIN #	6FMN12H02CD803251
Inspection Site	Ipswich VID	Rego Expiry	01/05/2019
Purpose of Use	COML	Colour	WHI
Number of Trailers	1	GVM / ATM	24500
COI Expiry Date		EOT Expiry Date	27/11/2018
Vehicle Message			

Tick Appropriate Box - Cross out if Not Applicable

Item	Pass	Fail	Item	Pass	Fail
<b>Electrical</b>			<b>Braking</b>		
1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<i>Method of Testing</i>		
2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Pass %	Fail %	Rollers
3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	56	59	Decel
4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Visual		
5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	27	Service Brake	
6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	28	Park Brake	
<b>Glazing</b>			29	Brake Report Attached	Yes
7	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	I have inspected items to Int Id#		
8	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<i>Method of Testing</i>		
<b>Seat / Seat Belts</b>			Plates	Raised	Visual
9	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30	King Pins / Wheel Bearings	Other
10	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	31	Arms / Linkages / Wheel	
<b>Mud Guards / Mud Flaps</b>			32	Steering Box / Pitman Arm	
11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	33	Free Play / Seals	
<b>Wheels / Tyres</b>			<b>Suspension</b>		
12	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Plates	Raised	Visual
13	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	34	Springs	Other
<b>Body / Fittings / Protrusions</b>			35	Hangers / Pins / Bushes	
14	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	36	Air Bags / Air Suspension	
15	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	37	Shock Absorbers	
16	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	38	Axles / Cross Members	
17	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<b>Oil / Fuel Leaks</b>		
<b>PT Requirements</b>			39	Engine / Driveline	
18	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	40	Steering / Accessories	
19	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<b>Exhaust</b>		
20	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	41	Leaks / Design / Security	
21	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	42	Emissions	
22	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<b>Mounting</b>		
23	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	43	Engine / Transmission / Body / Driveshaft	
<b>Tow Couplings</b>			<b>Air Systems</b>		
24	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	44	Leaks / Low Air / Contamination	
25	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	45	Breakaway / Protection Value	
26	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<b>Under Body / Chassis</b>		
<b>I have inspected items to Int Id#</b>			46	Cracks / Security / Design / Corrosion	
			<b>Modifications</b>		
			47	Fitting / Identification	
			<b>Vehicle Lifting Crane</b>		
			48	Stabiliser / Outtrigger's / Warning Devices	
			<b>I have inspected items to Int Id#</b>		
			1048 Int 9314 Id# 9314		

Label / Sticker #

Comments: (1) Horn (2) ds/kr park (3) brake s/pax (4) both drive axles loose

The Authorised Officer/s completing this checklist must sign below

I authorise a COI / DN to be issued to this vehicle. Signature: Not relevant Inspector ID Number 9314

I authorise a COI / DN to be issued to this vehicle. Signature: Inspector ID Number

<b>Name/Co.:</b>	<b>Semi-tractor</b>	<b>License pl. no.:</b>	<b>Semi-tractor</b>
<b>Street:</b>		<b>Mileage:</b>	<b>person</b>
<b>Zip code, city:</b>		<b>Init.reg.:</b>	491832
<b>Telephone:</b>		<b>Vehicle manuf.:</b>	/ /
<b>Test date:</b>	27/11/2018	<b>Vehicle type:</b>	
<b>Time time:</b>	8:10	<b>Veh. chassis no.:</b>	
<b>Loading status:</b>		<b>Number of axles:</b>	3

**BRAKE TEST**

	Roller res. [kN]		Brake force [kN]			Diff. [%]	Ovality [%]		Deceleration [%]		weight [t]		Pedal [N]	Pressure [bar]	
	Left	Right	Left	Right	Axle		Left	Right	sta.	dyn.	sta.	dyn.		Pm	Px
1. SB	0.68	0.42	3.46	5.31	8.77	35	---	---	52	61	1.73	1.45	---	---	---
2. PB	0.64	0.76	3.84	4.80	8.64	20	---	---	51	48	1.73	1.85	---	---	---
3. SB	0.42	0.35	4.26	4.62	8.89	8	---	---	50	58	1.80	1.57	---	---	---
3. PB	0.38	0.68	5.14	2.97	8.10	42	---	---	46	45	1.80	1.84	---	---	---

**final evaluation**

Service brake system (SB)	Max. brake force: [kN]	Imbalance [%]	Decel. static [%]	Decel. Dynamic [%]
Parking brake system (PB)	17.65	35	51	59
	16.74	42	48	56
Static weight:	3.53 t	Dynamic weight:	3.03 t	

Limit value brake tester	Axle	final evaluation
Deceleration SB min:	45 %	45 %
Deceleration PB min:	15 %	15 %
Difference of the brake forces max:	30 %	

Released under RTI

Inspector: Q314 Fred

Signature: .....



# Vehicle Check List

Registration #	personal	Owners Details	WOOD MULCHING INDUSTRIES P/L
Inspection Type	PROGRAMMED INSPECTION (OTHER)	SHOP 1B 13 BRENDAN DR, NERANG, QLD 4211	
Inspection Date	25/10/2019		
Inspection Time	10:15	Make & Model	MACK GRANITE
Odometer	564902	VIN #	6FMN12H02CD803251
Inspection Site	Ipswich VID	Rego Expiry	01/11/2019
Purpose of Use	COML	Colour	WHI
Number of Trailers	1	GVM / ATM	24500
COI Expiry Date	29/10/2019	EOT Expiry Date	
Vehicle Message			

Tick Appropriate Box - Cross out if Not Applicable

Not relevant

Item	Pass	Fail	Item	Pass	Fail
<b>Electrical</b>			<b>Braking</b>		
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Method of Testing</b>		
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pass %	Fail %	Rollers
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27	55	Decel
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	28	25	Visual
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	29		
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	I have inspected items to Int Id#		
<b>Glazing</b>			<b>Steering</b>		
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Method of Testing</b>		
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plates	Raised	Visual
<b>Seat / Seat Belts</b>			30		Other
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	31		
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	32		
<b>Mud Guards / Mud Flaps</b>			<b>Suspension</b>		
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Method of Testing</b>		
<b>Wheels / Tyres</b>			Plates	Raised	Visual
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	34		Other
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	35		
<b>Body / Fittings / Protrusions</b>			36		
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	37		
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	38		
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Oil / Fuel Leaks</b>		
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	39		
<b>PT Requirements</b>			40		
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Exhaust</b>		
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	41		
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	42		
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Mounting</b>		
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	43		
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Air Systems</b>		
<b>Tow Couplings</b>			44		
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	45		
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Under Body / Chassis</b>		
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	46		
			<b>Modifications</b>		
			47		
			<b>Vehicle Lifting Crane</b>		
			48		
I have inspected items to Int Id#			I have inspected items to Int Id#		

Label / Sticker # 122 U 9215

Comments:

The Authorised Officer/s completing this checklist must sign below

I authorise a COI / DN to be issued to this vehicle. Signature:

Not relevant

Inspector ID Number 659

I authorise a COI / DN to be issued to this vehicle. Signature:

Inspector ID Number

<b>Name/Co.:</b>	Semi-tractor	<b>License pl. no.:</b>	<b>Semi-tractor</b> person
<b>Street:</b>		<b>Mileage:</b>	564902
<b>Zip code, city:</b>		<b>Init.reg.:</b>	/ /
<b>Telephone:</b>		<b>Vehicle manuf.:</b>	
<b>Test date:</b>	25/10/2019	<b>Vehicle type:</b>	
<b>Time time:</b>	10:11	<b>Veh. chassis no.:</b>	
<b>Loading status:</b>		<b>Number of axles:</b>	3

**BRAKE TEST**

	Roller res. [kN]		Brake force [kN]			Diff. [%]	Ovality [%]		Deceleration [%]		weight [t]		Pedal [N]	Pressure [bar]	
	Left	Right	Left	Right	Axle		Left	Right	sta.	dyn.	sta.	dyn.		Pm	Px
1. SB	0.55	0.55	13.23	15.39	28.62	14	---	---	62	60	4.67	4.86	---	---	---
2. SB	0.45	0.76	6.88	6.91	13.79	0	---	---	37	49	3.76	2.85	---	---	---
2. PB	0.46	0.35	5.71	6.83	12.53	16	---	---	34	42	3.76	3.03	---	---	---
3. SB	0.63	0.71	8.69	7.46	16.16	14	---	---	47	64	3.50	2.59	---	---	---
3. PB	0.56	0.45	5.78	6.65	12.43	13	---	---	36	39	3.50	3.22	---	---	---

**final evaluation**

Service brake system (SB)	Max. brake force: [kN]	Imbalance [%]	Decel. static [%]	Decel. Dynamic [%]
Parking brake system (PB)	58.57	14	50	58
	24.96	16	21	25
Static weight:	11.93 t	Dynamic weight:	10.30 t	

**Limit value brake tester**

	Axle	final evaluation
Deceleration SB min:	45 %	45 %
Deceleration PB min:	15 %	15 %
Difference of the brake forces max:	30 %	

Released under RTI

Inspector: QG693 Brad

Signature: .....

Customer  personal info WOOD MULCHING INDUSTRIES P/L  Ind Birth Date

Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  Org **ACTIVE**

Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

**Inspection Details**

Type PROGRAMMED **FAILED**

Date 08/11/2016 Time 06 : 45

Details Recorded On 08/11/2016

Inspectors Number Q347

District VIDLOGANCI

Postcode 4114 State QLD

Odometer 393739

Fee Exempt

**Certificate Details**

Number

Manually issued

Effective  Expiry

Related Documents At VIDLOGANCI

Issued Defect Notice SD 25637480

Service Brake 69 %

Hand/Park Brake 26 % OR

**Intended Registration Details**

Category PRIME MOVER

Purpose of Use COMMERCIAL

**Previous Report**

Number

Clearance Reason

Released under RTI DTMP



Customer  WOOD MULCHING INDUSTRIES P/L  Ind Birth Date   
 Org **ACTIVE**  
 Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  
 Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

Defect Notice SD 25637480 Issued 08/11/2016  Manually issued Severity MINOR (NO LABEL)

Cease Use  
 Forthwith OR by  :  on


Re-inspection Due  
 Location VIDLOGANCI  
 Time  :  to 16:00  
 Date 22/11/2016  
 Appointment required

Clearance  
 Method SELF CLEARING  
 Rectify by Date 22/11/2016

Defects

<input type="checkbox"/> Identification	<input type="checkbox"/> Windscreen and glazing	<input type="checkbox"/> Wheels and tyres
<input type="checkbox"/> Modifications	<input type="checkbox"/> Body and chassis	<input type="checkbox"/> Tow couplings
<input type="checkbox"/> Seats and restraints	<input checked="" type="checkbox"/> Steering and suspension	<input type="checkbox"/> Service brake Reading <input type="text"/> %
<input checked="" type="checkbox"/> Lights and electrical components	<input type="checkbox"/> Engine/Drivelines/Emissions	<input type="checkbox"/> Hand/Park brake Reading <input type="text"/> %
	<input type="checkbox"/> Speed Limiter	

Additional Details

 1. ensure indicator flash rate complies  
 2. rectify cause of excess movement at no 2 axle rhs trac rod  
 3. rectify cause of excess movement at no 3 axle lhs torque rod  
 4. rectify cause of excess movement at no 2 axle rhs and no 3 axle lhs check absorbers

Individual Served  
 Customer    Ind Birth Date   
 Org  
 OR Non-Qld Driver Licence  Issued By



Customer  WOOD MULCHING INDUSTRIES P/L  Ind Birth Date   
 Org **ACTIVE**  
 Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  
 Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

Defect Notice SD 25637480 Issued 08/11/2016  Manually issued Severity MINOR (NO LABEL)

Cease Use  
 Forthwith OR by  :  on

Re-inspection Due  
 Location VIDLOGANCI  
 Time  :  to 16:00  
 Date 22/11/2016  
 Appointment required

Clearance  
 Method SELF CLEARING  
 Rectify by Date 22/11/2016

Defects

<input type="checkbox"/> Identification	<input type="checkbox"/> Windscreen and glazing	<input type="checkbox"/> Wheels and tyres
<input type="checkbox"/> Modifications	<input type="checkbox"/> Body and chassis	<input type="checkbox"/> Tow couplings
<input type="checkbox"/> Seats and restraints	<input checked="" type="checkbox"/> Steering and suspension	<input type="checkbox"/> Service brake Reading <input type="text"/> %
<input checked="" type="checkbox"/> Lights and electrical components	<input type="checkbox"/> Engine/Drivelines/Emissions	<input type="checkbox"/> Hand/Park brake Reading <input type="text"/> %
		<input type="checkbox"/> Speed Limiter

Additional Details

3. rectify cause of excess movement at no 3 axle rhs torque rod  
 4. rectify cause of excess movement at no 2 axle rhs and no 3 axle lhs shock absorbers

Note: not to be used commercially until above items have been rectified

Individual Served  
 Customer    Ind Birth Date   
 Org  
 OR Non-Qld Driver Licence  Issued By

Customer  personal informat WOOD MULCHING INDUSTRIES P/L  Ind Birth Date

Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  Org **ACTIVE**

Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

**Inspection Details**

Type DEFECT NOTICE **PASSED**

Date 07/12/2016 Time 11 : 23

Details Recorded On 07/12/2016

Inspectors Number QG1116

District VIDBEENLEI

Postcode 4207 State QLD

Odometer

Fee Exempt

**Certificate Details**

Number SA 25862771

Manually issued

Effective 08/11/2016 Expiry 29/10/2017

Related Documents At VIDBEENLEI

Issued Defect Notice

Service Brake  %

Hand/Park Brake  % OR

**Intended Registration Details**

Category PRIME MOVER

Purpose of Use COMMERCIAL

**Previous Report**

Number SD 25637480

Clearance Reason SCLR NTC CUST

Released under RTI DTMP



Customer personal informat WOOD MULCHING INDUSTRIES P/L

Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS

Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

Ind  Org Birth Date

**ACTIVE**

**Inspection Details**

Type PROGRAMMED **FAILED**

Date 27/10/2017 Time 08 : 00

Details Recorded On 27/10/2017

Inspectors Number QG2089

District VIDLOGANCI

Postcode 4114 State QLD

Odometer 411053

Fee Exempt

**Certificate Details**

Number

Manually issued

Effective Expiry

Related Documents At VIDLOGANCI

Issued Defect Notice SD 27532274

Service Brake 58 %

Hand/Park Brake 55 % OR

**Intended Registration Details**

Category PRIME MOVER

Purpose of Use COMMERCIAL

**Previous Report**

Number

Clearance Reason

Released under RTI DTMP

Customer  WOOD MULCHING INDUSTRIES P/L  Ind Birth Date   
 Org **ACTIVE**  
 Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  
 Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

Defect Notice SD 27532274 Issued 27/10/2017  Manually issued Severity MINOR (NO LABEL)

Cease Use  
 Forthwith OR by 12:00 on 27/11/2017

Re-inspection Due  
 Location VIDLOGANCI  
 Time : to 16:00  
 Date 09/11/2017  
 Appointment required

Clearance  
 Method APPROVED INSPECTION STN  
 Rectify by Date 09/11/2017

Defects

<input type="checkbox"/> Identification	<input type="checkbox"/> Windscreen and glazing	<input type="checkbox"/> Wheels and tyres
<input type="checkbox"/> Modifications	<input checked="" type="checkbox"/> Body and chassis	<input type="checkbox"/> Tow couplings
<input type="checkbox"/> Seats and restraints	<input checked="" type="checkbox"/> Steering and suspension	<input type="checkbox"/> Service brake Reading <input type="text"/> %
<input type="checkbox"/> Lights and electrical components	<input checked="" type="checkbox"/> Engine/Drivelines/Emissions	<input type="checkbox"/> Hand/Park brake Reading <input type="text"/> %
		<input type="checkbox"/> Speed Limiter

Additional Details

1.rectify damaged 2nd and 3rd axle mudguards

2.rectify engine oil leak ---clean down after repairs for reinspection

Individual Served  
 Customer    Ind Birth Date   
 Org  
 OR Non-Qld Driver Licence  Issued By



Customer  WOOD MULCHING INDUSTRIES P/L  Ind Birth Date   
 Org  
 Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  
 Postal PO BOX 671 MUDGEERABA QLD 4213 AUS ACTIVE  
Display

Defect Notice SD 27532274 Issued 27/10/2017  Manually issued Severity MINOR (NO LABEL)

Cease Use  
 Forthwith OR by 12:00 on 27/11/2017

Re-inspection Due  
 Location VIDLOGANCI  
 Time : to 16:00  
 Date 09/11/2017  
 Appointment required

Clearance  
 Method APPROVED INSPECTION STN  
 Rectify by Date 09/11/2017

Defects

<input type="checkbox"/> Identification	<input type="checkbox"/> Windscreen and glazing	<input type="checkbox"/> Wheels and tyres	
<input type="checkbox"/> Modifications	<input checked="" type="checkbox"/> Body and chassis	<input type="checkbox"/> Tow couplings	
<input type="checkbox"/> Seats and restraints	<input checked="" type="checkbox"/> Steering and suspension	<input type="checkbox"/> Service brake	Reading %
<input type="checkbox"/> Lights and electrical components	<input checked="" type="checkbox"/> Engine/Driveines/Emissions	<input type="checkbox"/> Hand/Park brake	Reading %
		<input type="checkbox"/> Speed Limiter	

Additional Details

2.rectify engine oil leak --- clean down after repairs for reinspection

3.ensure all 2nd and 3rd axle u bolts are correctly tensioned

Individual Served  
 Customer    Ind Birth Date   
 Org  
 OR Non-Qld Driver Licence Issued By

Close

Customer ▼ personal info WOOD MULCHING INDUSTRIES P/L

Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS

Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

Ind Birth Date

Org **ACTIVE**

**Inspection Details**

Type DEFECT NOTICE **PASSED**

Date 31/10/2017 Time 11 : 22

Details Recorded On 31/10/2017

Inspectors Number QG1116

District VIDBEENLEI

Postcode 4207 State QLD

Odometer

Fee Exempt

**Certificate Details**

Number SA 27109720

Manually issued

Effective 30/10/2017 Expiry 29/10/2018

Related Documents At VIDBEENLEI

Issued Defect Notice

Service Brake %

Hand/Park Brake % OR

**Intended Registration Details**

Category PRIME MOVER

Purpose of Use COMMERCIAL

**Previous Report**

Number SD 27532274

Clearance Reason AIS STAMPED DN



Customer  personal in  WOOD MULCHING INDUSTRIES P/L

Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS

Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

Ind  Org Birth Date

**ACTIVE**

**Inspection Details**

Type PROGRAMMED **FAILED**

Date 27/11/2018 Time 08 : 00

Details Recorded On 27/11/2018

Inspectors Number Q314

District VIDIPSWICH

Postcode 4305 State QLD

Odometer 491832

Fee Exempt

**Certificate Details**

Number

Manually issued

Effective  Expiry

Related Documents At VIDIPSWICH

Issued Defect Notice SD 29378998

Service Brake 59 %

Hand/Park Brake 56 % OR

**Intended Registration Details**

Category PRIME MOVER

Purpose of Use COMMERCIAL

**Previous Report**

Number

Clearance Reason

Released under RTI DTMP

Customer  WOOD MULCHING INDUSTRIES P/L  Ind Birth Date   
 Org **ACTIVE**  
 Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  
 Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

Defect Notice SD 29378998 Issued 27/11/2018  Manually issued Severity MAJOR (LABEL AFFIXED)

Cease Use  
 Forthwith OR by 10:30 on 27/11/2018

Re-inspection Due  
 Location VIDIPSWICH  
 Time : to 16:00  
 Date 11/12/2018  
 Appointment required

Clearance  
 Method APPROVED INSPECTION STN  
 Rectify by Date 11/12/2018

Defects

<input type="checkbox"/> Identification	<input type="checkbox"/> Windscreen and glazing	<input type="checkbox"/> Wheels and tyres	
<input type="checkbox"/> Modifications	<input type="checkbox"/> Body and chassis	<input type="checkbox"/> Tow couplings	
<input type="checkbox"/> Seats and restraints	<input checked="" type="checkbox"/> Steering and suspension	<input checked="" type="checkbox"/> Service brake	Reading 59 %
<input checked="" type="checkbox"/> Lights and electrical components	<input type="checkbox"/> Engine/Drivelines/Emissions	<input type="checkbox"/> Hand/Park brake	Reading %
		<input type="checkbox"/> Speed Limiter	

Additional Details

1/ MAKE HORN BUTTON OPERATE ALL THE TIME ON STEERING WHEEL  
 2/ DRIVERS SIDE FRONT PARKLIGHT  
 3/ STEER AXLE BRAKES UNBALANCED - PASSENGERS SIDE POOR  
 4/ BOTH DRIVE AXLES LOOSE DRIVERS SIDE 11 BOLTS LOOSE

Individual Served  
 Customer    Ind Birth Date   
 Org  
 OR Non-Qld Driver Licence  Issued By

Customer  WOOD MULCHING INDUSTRIES P/L  Ind Birth Date   
 Org **ACTIVE**  
 Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  
 Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

Defect Notice SD 29378998 Issued 27/11/2018  Manually issued Severity MAJOR (LABEL AFFIXED)

Cease Use  
 Forthwith OR by 10:30 on 27/11/2018

Re-inspection Due  
 Location VIDIPSWICH  
 Time : to 16:00  
 Date 11/12/2018  
 Appointment required

Clearance  
 Method APPROVED INSPECTION STN  
 Rectify by Date 11/12/2018

Defects

<input type="checkbox"/> Identification	<input type="checkbox"/> Windscreen and glazing	<input type="checkbox"/> Wheels and tyres	
<input type="checkbox"/> Modifications	<input type="checkbox"/> Body and chassis	<input type="checkbox"/> Tow couplings	
<input type="checkbox"/> Seats and restraints	<input checked="" type="checkbox"/> Steering and suspension	<input checked="" type="checkbox"/> Service brake	Reading 59 %
<input checked="" type="checkbox"/> Lights and electrical components	<input type="checkbox"/> Engine/Drivelines/Emissions	<input type="checkbox"/> Hand/Park brake	Reading %
		<input type="checkbox"/> Speed Limiter	

Additional Details

1/ MAKE HORN BUTTON OPERATE ALL THE TIME ON STEERING WHEEL  
 2/ DRIVERS SIDE FRONT PARKLIGHT  
 3/ STEER AXLE BRAKES UNBALANCED - PASSENGERS SIDE POOR  
 4/ BOTH DRIVE AXLES LOOSE DRIVERS SIDE - U-BOLTS LOOSE

Individual Served  
 Customer    Ind Birth Date   
 Org  
 OR Non-Qld Driver Licence Issued By



Customer personal info WOOD MULCHING INDUSTRIES P/L Ind Birth Date ACTIVE

Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS Org

Postal PO BOX 671 MUDGEERABA QLD 4213 AUS Display

**Inspection Details**

Type DEFECT NOTICE PASSED

Date 27/11/2018 Time 15 : 23

Details Recorded On 27/11/2018

Inspectors Number QG2071

District VIDIPSWICH

Postcode 4305 State QLD

Odometer

Fee Exempt

**Certificate Details**

Number SA 29418829

Manually issued

Effective 27/11/2018 Expiry 29/10/2019

Related Documents At VIDIPSWICH

Issued Defect Notice

Service Brake %

Hand/Park Brake % OR

**Intended Registration Details**

Category PRIME MOVER

Purpose of Use COMMERCIAL

**Previous Report**

Number SD 29378998

Clearance Reason AIS STAMPED DN

Close

Released under RTI DTMP

Customer  personal info WOOD MULCHING INDUSTRIES P/L  Ind Birth Date

Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  Org **ACTIVE**

Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

**Inspection Details**

Type PROGRAMMED **FAILED**

Date 25/10/2019 Time 10 : 15

Details Recorded On 25/10/2019

Inspectors Number QG693

District VIDIPSWICH

Postcode 4305 State QLD

Odometer 564902

Fee Exempt

**Certificate Details**

Number

Manually issued

Effective  Expiry

Related Documents At VIDIPSWICH

Issued Defect Notice SD 31193954

Service Brake 58 %

Hand/Park Brake 25 % OR

**Intended Registration Details**

Category PRIME MOVER

Purpose of Use COMMERCIAL

**Previous Report**

Number

Clearance Reason

Released under RTI DTMP

Customer  WOOD MULCHING INDUSTRIES P/L  Ind Birth Date   
 Org **ACTIVE**  
 Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS  
 Postal PO BOX 671 MUDGEERABA QLD 4213 AUS

Defect Notice SD 31193954 Issued 25/10/2019  Manually issued Severity MINOR (NO LABEL)

Cease Use  
 Forthwith OR by 16:00 on 28/10/2019

Re-inspection Due  
 Location VIDIPSWICH  
 Time : to 16:00  
 Date 08/11/2019  
 Appointment required

Clearance  
 Method SELF CLEARING  
 Rectify by Date 08/11/2019

Defects

<input type="checkbox"/> Identification	<input type="checkbox"/> Windscreen and glazing	<input type="checkbox"/> Wheels and tyres
<input type="checkbox"/> Modifications	<input type="checkbox"/> Body and chassis	<input type="checkbox"/> Tow couplings
<input type="checkbox"/> Seats and restraints	<input checked="" type="checkbox"/> Steering and suspension	<input type="checkbox"/> Service brake Reading <input type="text"/> %
<input type="checkbox"/> Lights and electrical components	<input type="checkbox"/> Engine/Drivelines/Emissions	<input type="checkbox"/> Hand/Park brake Reading <input type="text"/> %
		<input type="checkbox"/> Speed Limiter

Additional Details  
 1/ Axle 2 right side movement ( loose U bolts)

Individual Served  
 Customer    Ind Birth Date   
 Org  
 OR Non-Qld Driver Licence  Issued By



Customer personal info WOOD MULCHING INDUSTRIES P/L Ind Birth Date ACTIVE

Address SHOP 1B 13 BRENDAN DRIVE NERANG QLD 4211 AUS Org

Postal PO BOX 671 MUDGEERABA QLD 4213 AUS Display

**Inspection Details**

Type DEFECT NOTICE **PASSED**

Date 28/10/2019 Time 10 : 30

Details Recorded On 28/10/2019

Inspectors Number Q812

District VIDDARRA

Postcode 4076 State QLD

Odometer

Fee Exempt

**Certificate Details**

Number SA 31047885

Manually issued

Effective 30/10/2019 Expiry 29/10/2020

Related Documents At VIDDARRA

Issued Defect Notice

Service Brake %

Hand/Park Brake % OR

**Intended Registration Details**

Category PRIME MOVEMENT

Purpose of Use COMMERCIAL

**Previous Report**

Number SD 31193954

Clearance Reason SCLR NTC CUST

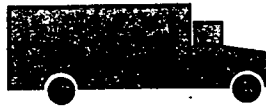
Close

Released under RTI DTMP

# Certificate of Inspection

(Vehicles over 4.5 tonne up to and including 16.0 tonne RGVM)

Transport Operations (Road Use Management) Act 1995



Queensland Government

HV-A 268259 2

## Owner and vehicle details

Vehicle Owner's name and address

WOOD MULCHING INDUSTRIES/LL  
5/10 BURNSIDE RD  
ORMEAU Postcode 4208

Plate number (if applicable) State

/ /

VIN/Chassis number

G F M N 1 2 H 0 2 C D 8 0 3 2 5 1

Make Model

MACK GRANITE

Body shape Badge (e.g. Cargo)

PRIME MOVER SLANT 6

Number of cylinders Fuel type (if gas, a current gas certificate is required for registration purposes)

6 DIESEL

Engine number

M P 8 4 3 5 9 8 3 0 1 4

## Compliance type

Compliance Plate  Import Plate  Other  Give details

Date on Plate Vehicle colour Seating capacity  
02/12 WHITE 2

Left or Right hand drive? Left  Right

Tare GVM GCM  
8500 24500

Speed limiter fitted? Yes  No  Not applicable

## Results of inspection— Please indicate Pass Fail

	First inspection	Final inspection
Identification	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Modifications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Seats & Restraints	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lights & Electrical Components	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Windscreen & Windows	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Body & Chassis	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Steering & Suspension	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wheels & Tyres	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Brakes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Engines & Drivelines	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Exhaust Emissions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Road Test	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Service Brake Test	<input checked="" type="checkbox"/> 69%	<input type="checkbox"/> %
Hand Brake Test	<input checked="" type="checkbox"/> 30%	<input type="checkbox"/> %

Details of other items rejected

/

Mobile AIS unit - location of vehicle inspection

## First inspection

Odometer reading  
Result  315905

Inspection date Inspection time Mobile AIS unit odometer reading  
30/10 2015 12:00 am pm

Signature of Examiner  
Not relevant Examiner's no. Not relevant

## Final inspection (must not be more than 14 days from date of first inspection)

Odometer reading  
Result

Inspection date Inspection time Mobile AIS unit odometer reading  
/ / 2 Nov 2015 am pm

Signature of Examiner Examiner's no.

## Inspection Station details

Name and location PRO AUTOMOTIVE RWC  
4 COOKS RD  
WONGGOLLA 4207  
ABN 32785040926 Postcode  
PH 55462800 FAX 55462995

Approved Inspection Station Number Mobile AIS unit Registration Number  
7883

## Certification

Approved Examiner - I have inspected the vehicle indicated on this form in strict accordance with the guidelines set out in the Code of Practice Vehicle Inspection Guidelines and have found no defect that would affect its safe use on the road and it meets the requirements of the Transport Operations (Road Use Management) Act.

Inspected by - Signature of Examiner Date  
Not relevant 30/10 2015

Name of Examiner (please print) Examiner's no.  
Not relevant Not relevant

Proprietor - I have ensured that the requirements of the Transport Operations (Road Use Management) Act relating to the issue of this certificate have been complied with.

Issued by - Signature of Proprietor Date  
Not relevant 30/10 2015

Name of Proprietor (please print)  
Not relevant

**Privacy Statement:** The Department of Transport and Main Roads (the department) is collecting the information on this form for the purposes of managing the department's vehicle register. This information is authorised or required by the Transport Operations (Road Use Management) Act. The department or its agents usually gives some or all of this information to vehicle insurers, statutory entities, lawyers, insolvency entities, persons involved in vehicle accidents/incidents or vehicle manufacturers or their employees or agents and to or through interstate registration authorities. Your personal details will not be disclosed to any other third party without your consent unless required or authorised by law.

- Original (Pink) - This copy for registration of vehicle
- Duplicate (Yellow) - Purchaser's/ Owner's copy
- Triplicate (Green) - To be given to owner where a further inspection is required
- Quadruplicate (White) - Book copy



**1. Operator details**

Vehicle Operator's name and address

WOOD MURCHINS ENGINEERS  
5/10 BURNSIDE RD  
ORMBAY Postcode 4208

**2. Vehicle details**

Previous plate number (if applicable) State/Territory of issue

/ /

VIN/Chassis number

6FMN12H02CD803251

Engine number

MP8435983014

Make

MACK

Model

GRANITE

Body shape

PRIME MOVER

Series (for example, XH)

Badge (for example, Longreach, Tradesman)

MACK

Number of cylinders/rotors Fuel type (for example, petrol, gas)

6 DIESEL

Seating capacity

2 persons

Motorcycle engine capacity

mLs

Odometer reading Conversion to kilometres (if required)

kms/miles 315905 kms (Miles x 8/5)

**3. Vehicle mass details**

Tare

8500 kgs

GVM/ATM

24500 kgs

GCM/GTM

kgs

**4. Does the vehicle have left or right hand drive?**

Left  Right

**5. Vehicle colour**

Primary

WHITE

Secondary

**Privacy Statement:** The Department of Transport and Main Roads is collecting the information on this form for the purposes of maintaining the Department of Transport and Main Roads' vehicle registration register, as required under the Transport Operations (Road Use Management) Act. Where required, the Department of Transport and Main Roads or its agents/contractors may give some or all of this information to vehicle insurers, statutory entities, insolvency entities, lawyers, persons involved in vehicle incidents/accidents, vehicle manufacturers, third parties who are involved in or intend to commence various legal proceedings, tolling entities, law enforcement agencies and to or through interstate registering authorities. Your personal information will not be disclosed to any other third party without your consent, unless authorised or required to do so by law.

CHARO AUTOMOTIVE RWC  
4 COOKS RD  
WOONGOOLOO 4207  
ABN 32785040926  
PH 55462800 FAX 55462995

**6. Compliance type**

Is an Identification Plate (Compliance Plate) fitted?

Yes  What type of Identification Plate is fitted?

Full Identification Plate

What date is shown on this plate?

Month Year  
02/12

Low Volume Identification Plate

What is the date of manufacture?

Month Year  
/ /

Personal Import Plate

Other  please give details

No  please give details

**7. Modification details**

Has the vehicle been modified in any way from its original design? (for example, change of engine type, additional seating)

No  Go to 8

Yes  Has a modification plate been fitted?

No  A modification plate may need to be fitted before this application can proceed.

Yes  Give details below (please include A/Officer's number/modification code and description/date of modification)

P/N 585483 A/O 2717  
P2 REFTS1169

**8. Is a Speed Limiter fitted? Yes  No**

**9. Declaration**

Inspection was carried out by (Tick one box)

Registered operator/representative

Department of Transport and Main Roads approved agent

I have inspected the vehicle indicated on this form and certify the information contained in this form is complete, true and correct and has been taken from the vehicle itself.

Full name (please print)

Not relevant

Customer Reference Number

Not relevant

Signature

Not relevant

Date

30/10/2015

It is an offence to give false or misleading information under the Transport Operations (Road Use Management) Act. Maximum penalty may exceed \$6000.



# Prime Mover Inspection Sheet

Transport Operations (Road Use Management) Act 1995 or the Interstate Road Transport Act 1985



- This inspection must be carried out only by a Department of Transport and Main Roads Officer or HVRAS Authorised Person.
- This inspection sheet must be used in conjunction with Vehicle Details form F3529.

## 1. Vehicle details

Make/Model

MAK SCANTIA

VIN/Chassis/Engine number

6FMN12H02C08103251

## 2. Is the vehicle imported?

Yes  No  Go to Question 3

Was the vehicle previously registered in Australia?

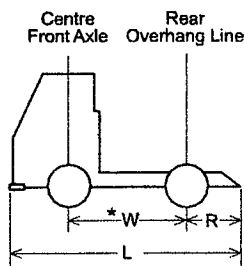
Yes  Previous Registration number  Go to Question 3

No  Vehicle must be presented at a Department of Transport and Main Roads Customer Service Centre for inspection.

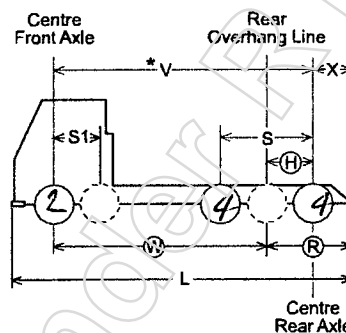
## 3. Measurements

- Using the diagram as a guide, provide the following dimensions in metres correct to 2 decimal places (e.g. 12.54, 2.42)
- Write the number of tyres per axle in the wheel spaces.
- Letters in circles, for e.g. (R), indicate distances that are to be calculated using formulas provided.

Prime Mover with single axles



Prime Mover with axle group/s



Width	2.50
Height	3.70
L	7.30

For Prime Movers with a single rear axle.

W	/
R	/

\* This measurement is the extreme axle distance (EAD) for registration purposes

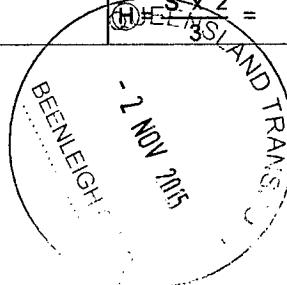
## 4. Rear Overhang Line (for prime movers with rear axle groups)

Tick (✓) the relevant rear axle group, then calculate for (H) using the Formula given.

Rear Axle Group	Axle groups with the same number of tyres per axle <input checked="" type="checkbox"/>	<input type="checkbox"/> F 2 4 R	<input type="checkbox"/> F 4 2 R
Calculation of (H)	$H = \frac{S}{2} = 0.65$	$H = \frac{S}{3} =$	$H = \frac{S \times 2}{3} =$

For Prime Movers with a rear axle group (W) and (R) measurements must be calculated.

V	5.10 *
S1	/
S	1.30
X	0.80
(W) = (V - (H)) =	4.45
(R) = (X + (H)) =	1.45



## 5. Regulation Limits

1. Is the width of the vehicle 2.50 metres or less? Yes  No
2. Is the height of the vehicle 4.30 metres or less? Yes  No
3. Is 'L' 12.50 metres or less? Yes  No
4. Is 'R' 3.70 metres or less? Yes  No
5. Is 'R' equal to or less than 60% of 'W'? (i.e. 'W' x 0.6) Yes  No

If a box like this  is ticked, the vehicle does not comply with regulation limits and registration is to be refused.

Continued over page....

**Prime Mover Inspection Sheet continued .... page 2 of 2**

**6. Axle Group**

- 1. If the vehicle has a Twin Steer Front Axle Group — Is 'S1' between 1.00 m and 2.00 m? Yes  No
- 2. If the vehicle has a Tandem Axle Group — Is 'S' between 1.00 m and 2.00 m? Yes  No
- 3. If the vehicle has a Rear Tri Axle Group — Is 'S' between 2.00 m and 3.20 m? Yes  No
- 4. Is the front axle group fitted with load sharing suspension? Yes  No
- 5. Is the rear axle group fitted with load sharing suspension? Yes  No

If a box like this  is ticked, the vehicle does not comply with axle group requirements. Contact Vehicle Standards and Regulation Unit for further details.

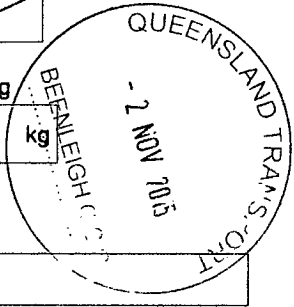
**7. GCM/GVM details**

Front Axle Rating kg	Tyre type Conventional <input type="checkbox"/> Radial <input checked="" type="checkbox"/>	Size 295/80/22.5	Ply Rating 18	Load Rating 152 / 148
Rear Axle Rating kg	Tyre type Conventional <input type="checkbox"/> Radial <input checked="" type="checkbox"/>	Size 11R22.5	Ply Rating 13	Load Rating 152
GVM 24500 kg	GCM kg	B/Double Rating kg	Roadtrain Rating kg	

GVM/GCM details from:- (Tick one box)

Identification/Compliance Plate  Vehicle/Manufacturer's Plate

Other (for e.g. modification plate, manufacturer's rating letter)  Please state



**8. Declaration**

Inspection was carried out by (Tick one box) (Please affix Office/Business Stamp)

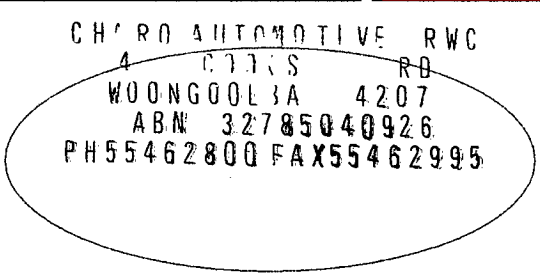
Department of Transport and Main Roads Officer  HVRAS Authorised Person

I have inspected the vehicle indicated on this form and certify the information contained in this form is complete, true and correct and has been taken from the vehicle itself.

Full name (please PRINT) Customer Reference Number

Signature

Date  
 30/10/2011



**Privacy statement:** The Department of Transport and Main Roads collects the personal information in the above declaration to support that the inspection has been carried out on the said vehicle. This information may be released by the department or its agents/contractors to parties such as vehicle insurers, statutory/insolvency entities, lawyers, persons involved in vehicle accidents/incidents and to or through interstate registering authorities. This information will be held by the department and your personal information will not be disclosed to a third party without your consent, unless authorised or required to do so by law.



# Rigid Truck Inspection Sheet

Transport Operations (Road Use Management) Act 1995 or the Heavy Vehicle National Law Act 2012 (HVNL)

- This inspection must be carried out only by a Department of Transport and Main Roads (TMR) Officer, a Queensland Police Service Officer or HVRAS Authorised Person.
- This inspection sheet must be used in conjunction with *Vehicle Details Inspection Sheet* (form F3529).

## 1. Vehicle details

Body type (e.g. tray, tipper, pantech) TIPPER Make/Model CUMMINS MACK TRACTOR 24500  
2 seats

VIN/Chassis/Engine number 6FMMN12K02GD8032511

## 2. Is the vehicle imported?

Yes  No  **Go to Question 3**

Was the vehicle previously registered in Australia?

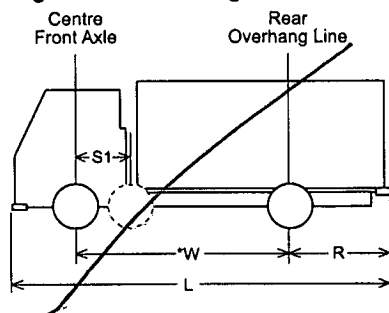
Yes  Previous Registration number  **Go to Question 3**

No  Vehicle must be presented at a TMR customer service centre for inspection and a copy of the import approval for the vehicle provided.

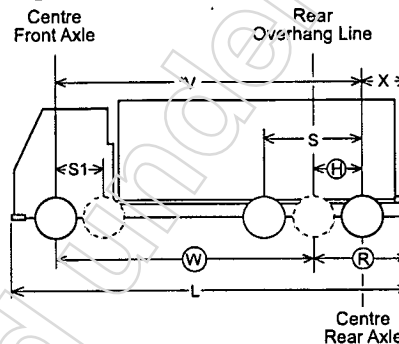
## 3. Measurements

- Using the diagram as a guide, provide the following dimensions in metres correct to two decimal places (e.g. 12.54, 2.42).
- Write the number of tyres per axle in the wheel spaces.
- Letters in circles, for example (R), indicate distances that are to be calculated using formulas provided.
- If the truck is fitted with a retractable axle, all measurements are to be taken with the retractable axle, in contact with the ground and in the lifted position. Use a separate inspection sheet for each configuration.

### Rigid Truck with single axles



### Rigid Truck with axle group/s



Width	<u>2.5</u>
Height	<u>23.96</u>
L	<u>7.7</u>

For Rigid Trucks with a single rear axle.

S1 (if applicable)	.
W	.
R	.

For Rigid Trucks with a rear axle group (W) and (R) measurements must be calculated.

V	<u>5.26</u>
S1	.
S	<u>1.34</u>
X	<u>1.3</u>
(W) = (V - H) =	<u>4.59</u>
(R) = (X + H) =	<u>1.97</u>

\* This measurement is the extreme axle distance for registration purposes.

## 4. Rear Overhang Line (for rigid trucks with rear axle groups)

Tick (✓) the relevant rear axle group, then calculate for '(H)' using the formula given.

Rear Axle Group	Axle groups with the same number of tyres per axle <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		F (2) (4) R	F (4) (2) R
Calculation of '(H)'	$(H) = \frac{S}{2} = 0.67$	$(H) = \frac{S}{3} =$	$(H) = \frac{S \times 2}{3} =$

## 5. Regulation Limits

- Is the width of the vehicle 2.50 metres or less? Yes  No
- Is the height of the vehicle 4.30 metres or less or 4.60 metres or less if built to carry livestock? Yes  No
- Is 'L' 12.50 metres or less? Yes  No
- Is 'R' 3.70 metres or less? Yes  No
- Is 'R' equal to or less than 60% of 'W'? (i.e. 'W' x 0.6 = 2.15) Yes  No

Yes  No

Yes  No

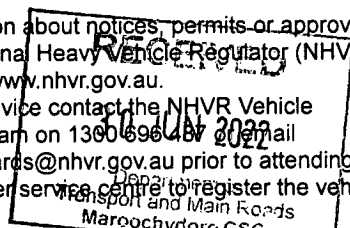
Yes  No

Yes  No

Yes  No

If a box like this  is ticked, the vehicle does not comply with regulation limits. The vehicle, if eligible will be required to operate under a notice, permit or approval.

For information about notices, permits or approvals, visit the National Heavy Vehicle Regulator (NHVR) webpage at [www.nhvr.gov.au](http://www.nhvr.gov.au). For further advice contact the NHVR Vehicle Standards Team on 1300 964872 or email [vehiclestandards@nhvr.gov.au](mailto:vehiclestandards@nhvr.gov.au) prior to attending a TMR customer service centre to register the vehicle.





**6. Axle Group**

- 1. If the vehicle has a Twin Steer Front Axle Group is 'S1' between 1.00 metre and 2.00 metres? N/A Yes  No
- 2. If the vehicle has a Tandem Axle Group is 'S' between 1.00 metre and 2.00 metres? Yes  No
- 3. If the vehicle has a Rear Tri Axle Group is 'S1A' between 2.00 metres and 3.20 metres? N/A Yes  No
- 4. Is the rear axle group fitted with load sharing suspension? Yes  No
- 5. Is the front axle group fitted with load sharing suspension? N/A Yes  No

If a box like this  is ticked, the vehicle does not comply with axle group requirements. Contact the NHVR Standards Team on 1300 696 487 or email [vehiclestandards@nhvr.gov.au](mailto:vehiclestandards@nhvr.gov.au) for further details prior to attending a TMR customer service centre to register the vehicle.

**7. GVM/GCM details**

Front Axle Rating	Tyre type:	Size	Ply Rating	Load Rating	Speed Rating
3550 kg x2	Conventional <input type="checkbox"/>	295/80R22.5	18	15.2	
	Radial <input checked="" type="checkbox"/>			14.9M	
Rear Axle Rating	Tyre type:	Size	Ply Rating	Load Rating	Speed Rating
3000 kg x4	Conventional <input type="checkbox"/>	11R22.5	16		
	Radial <input checked="" type="checkbox"/>				
GVM	GCM	B/Double Rating	Roadtrain Rating		
10000 kg					

GVM/GCM obtained from (tick one box only):-

Register of Approved Vehicles  Identification/Compliance Plate  Vehicle/Manufacturer's Plate  Modification Plate

Other (for example manufacturer's rating letter)  Please state

Does the vehicle exceed mass limits? No  Yes  Vehicle does not comply to mass limits and can not be registered.

**8. Declaration** Inspection was carried out by (Tick one box) (Please affix Office/Business Stamp)

- TMR Officer  Queensland Police Service Officer  HVRAS Authorised Person

I have inspected the vehicle indicated on this form and certify the information contained in this form is complete, true and correct and has been taken from the vehicle itself.

Full name (please print)	Customer Reference Number
LMBRUNJ	
Signature	
<span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; background-color: #ccc;">Not relevant</span>	
Date	Office/Business Stamp
30/6/2022	

**Privacy statement:** TMR collects the personal information in the above declaration to support that the inspection has been carried out on the said vehicle. This information may be released by TMR or its agents/contractors to parties such as the NHVR, vehicle insurers, statutory/insolvency entities, lawyers, persons involved in vehicle accidents/incidents and to or through interstate registering authorities. This information will be held by TMR and your personal information will not be disclosed to a third party without your consent, unless authorised or required to do so by law.

