

Vehicle Check List

Registration #		Owners Details	Not Relevant
Inspection Type	PROGRAMMED INSPECTION (OTHER)		
Inspection Date	23/09/2010		
Inspection Time	08:50	Make and Model	TOYOTA HIACE
Odometer		VIN #	J
Inspection Site	Toowoomba VID	Rego Expiry	25/09/2010
Purpose of Use	PRIV	Colour	WHI
Number of Trailers	0	GVM / ATM	2850
Vehicle Message			

Tick Appropriate Box - Cross out if Not Applicable

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

Label / Sticker #	Comments:
	Defect 14618274
I authorise a COI / DN to be issued to this vehicle. Signature:	Inspectors ID# 370/31

NB: The issuing of a COI ensures this vehicle has no defects that would affect its safe use on the road.

Defect Notice

Transport Operations (Road Use Management) Act



Queensland
Government
Queensland Transport

Id: SD 14518274

Registered Operator or Owner

Not Relevant

Vehicle Details

Plate No : [REDACTED] State : QLD Reg Expiry : 25/09/2010
Make : TOYOTA Body Shape : MINIBUS Reg Category : MINI BUS
Engine no : [REDACTED] VIN Number : [REDACTED]
Odometer : 482746 Inspection Type: PROGRAMMED

Defect Details

MAJOR (LABEL APPLIED)

The requirements specified below must be complied with.

Carry out the replacements, repairs or alterations set out below by 07/10/2010

and you are required to:-

Produce the vehicle for a full Certificate of Inspection/Safety Certificate inspection at an Approved Inspection Station and present completed documentation

at/to QLD FPT, Cnr WARRICK & YALDWIN ST, HARRISTOWN QLD 4350
at 16:00 on 07/10/2010.

Replacement, Repairs or Alterations required to the following:

SEATS AND RESTRAINTS STEERING AND SUSPENSION
ENGINE/DRIVELINES/EMISSIONS

Details of other items rejected:

1. RECTIFY CAUSE OF EXCESS MOVEMENT IN LOWER BALL JOINT ON LEFT HAND SIDE
2. RECTIFY CAUSE OF OIL LEAK AT MOTOR, AND CLEAN DOWN AFFECTED SEAT
3. ENSURE ALL SEAT BELTS WORK CORRECTLY (RETRACT, 2ND FROM THE 2ND AND 3RD FROM THE BACK RIGHT HAND SIDE)

" NOTE 2ND AND 3RD OUTER SEATS FROM THE BACK NOT TO BE USED UNTIL SEATBELTS FIXED "

Declaration of service: I declare that this notice was given to the person nominated below:-

Licence no. [REDACTED] Licence issued (State) QLD Date of Birth [REDACTED]

at 8:50 on 25/09/2010 personally.

Inspecting officer's signature [REDACTED] Auth. no. 320

Signature of person to whom notice was given [REDACTED]

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VIN

Engine Number

Plate

Make and Model 1997 TOYOTA HIACE MINIBUS 4CYL PETROL WHI 14SEAT RHD

ACTIVE

Customer

Not Relevant

Ind

Birth Date

Org

ACTIV

Address

Postal

Registration

Period of Registration

Plate

CANCEL

Current

Future

Category MINI BUS

Effective 26/09/2016

Purpose of Use PRIVATE

Expiry 25/09/2017

Inspection Expiry

Action Date	Type	Action	Report Number	Reason	Expiry	Previous Report
30/09/2010	DEFECT NOTICE	PASS COI	SA 14608264	AIS STAMPED DN	15/09/2011	SD 14618274
23/09/2010	DEFECT NOTICE	BOOK			07/10/2010	SD 14618274
23/09/2010	PROGRAMMED	FAIL DN	SD 14618274		07/10/2010	
07/09/2010		ISSUE	ET 3082596	REGIST EXT TIME	23/09/2010	
07/09/2010	PROGRAMMED	PAY			23/09/2010	
07/09/2010	PROGRAMMED	BOOK			23/09/2010	