

Heavy vehicle specialist certificate

Must be presented to a CoF (heavy) inspecting organisation if not entered into LANDATA

Heavy vehicle specialist inspector's or manufacturing					ID CODD 4			
•	GEORGE BARBOUR				GRB4			
Plate number (optional)	VIN/chassis numb		0 3 5	M 2 0	2	3 0	8 9	
Make 2021 DOMETT	Component being	; certified:	Chassi	is		Load a	anchorage	
Model (optional) C2003 PH	Log bolsters		√ Towing connection			Brakes		
Certification category HVET	SRT				PSV rollover			
	Swept path		PBS					
NEW FIFTHWHEEL MOUNT	MANUFAC	TUREC	ANDE	ITTED E	RY D	OMET	-	
THE VITTI TITIVITEEL MOONT	WANOI AC	TONLL	ANDI	IIILDL	ט ו ט	OIVILI	1.	
			3					
ode/standard/rule certified to Component load rating(s)								
NZS 5450:1989	MTM 29,000kg VERTICAL 10,000				٧			
General drawing number(s) 6400-03		VE	KIICAL	10,000κ	J	***************************************		
Supporting documents								
PROMECH CALCULATIONS ATTACHED ON FILE 3168-98.								
Special conditions (optional) THIS CERTIFICATE IS A STATEMENT OF COMPLIANCE AT I WARRANTY WITH RESPECT TO THE WORK CERTIFIED OR NZTA APPROVED HEAVY VEHICLE SPECIALIST CERTIFIER IF VEHICLE/COMPONENT IS SUBSEQUENTLY MODIFIED, A	ANY OTHER ASPECT CON OR BEFORE THE C	F THIS VEHICLE ERTIFICATION	E. COMPONENT EXPIRY DATE S	T/VEHICLE IS TO	BE RE-II	NSPECTED E	BY AN	
Certification expiry date (if applicable) 20-05-2031	or	Hubodom	eter reading (whichever comes fi	rst)			
			ID					
Declaration		Designer's	ID (if different fi	rom inspector belov	v)			
I the undersigned, declare that I am the heavy vehicle		Inspector's	s signature		1	1		
inspector identified and I hold a current valid appoints certify that the above mentioned vehicle component's	design,		Gez	- h	h			
manufacture and installation, and this certification cor in all respects with the Land Transport Rule: Vehicle St	andards	A CONTRACTOR OF THE PERSON NAMED IN	s name (PRINT			ID number		
Compliance 2002 and my appointment. To the best of knowledge the information contained in the certificate			ORGE BA			G R	B 4	
and correct.		Date 20-	05-2021	Numb		8366	7	
CoF vehicle inspector ID (if applicable)	CoF vehicle inspecto	r signature (if applicable)	Date				
						Single Complete	DESCRIPTION OF THE PERSON OF T	

All fields are mandatory unless otherwise stated.