



CERTIFICATE NUMBER

**Commercial Vehicle Inspection Certificate
Traffic Safety Act**

PART 1 - VEHICLE OWNER AND VEHICLE IDENTIFICATION

Vehicle Type:	Trailer	Seating Capacity:	
GVW:	kg	Brake Type:	Air
Owner Name:	Capital Pressure Ltd.		
Address:	Box 1960		
City:	Sundre	Province:	AB
Postal Code:	T0M1X0		
Telephone Number:	(403) 638-2256		
Vehicle Identification Number:	2L9TS53379D079575		
Make:	Lazer Inox	Model:	TC407
Year:	2009	Unit Number:	01T
Odometer:	KM	Licence Plate Number:	5TP163
		Province:	AB

IT IS AN OFFENCE TO FALSIFY AN INSPECTION CERTIFICATE

PART 2 - CERTIFICATION

I certify the vehicle described in Part 1 has passed the inspections and tests established under the Traffic Safety Act for a Commercial Vehicle.

Inspection Facility Name:	Capital Pressure Ltd.	Facility Number:	17020
Inspection Technician Name:	Daniel Reaman	Technician Number:	C5063
Inspection Technician Signature:			
Inspection Date:	2020/04/11		