



CERTIFICATE NUMBER

Commercial Vehicle Inspection Certificate Traffic Safety Act

PART 1 - VEHICLE OWNER AND VEHICLE IDENTIFICATION

Vehicle Type:		Truck			Seating	Seating Capacity							
GVW:		32100 kg			Brake 1	Brake Type:			Air				
Owner Name:		Capital Pressure Ltd.											
Address: Box 1960													
City: Sundre		Pro	ovince: AB					Posta	al Code: T0M		11X0		
Telephone Number: (403) 638-2256													
Vehicle Identification			on Number: 5KKPALAV05					65					
Make: Western Star						del:	Conventional						
Year: 2		2005		Unit Nu			ımber:		708				
Odometer:	302425 KM Licenc			e Plate Nu	Plate Number			E15988		Provinc	e:	AB	
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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.

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Inspection Facility Name:		Facility Number:				
Capital Pressure Ltd.		17020				
Inspection Technician Name:		Technician Number:				
Daniel Reaman		C5063				
Inspection Technician Signate	ure:	12				
Inspection Date:	2019/11/25					