

THE CONNECTICUT AUTOCROSS & RALLY TEAM , INC.**TIME TRIAL TECHNICAL INSPECTION FORM*******REQUIRED FOR ALL CARS******PRESS THE PRINT BUTTON ON YOUR BROWSER TO PRINT -*

CAR NO _____ PRACTICE GROUP _____

NAME _____

EXTERIOR	PASS	FAIL
NUMBERS ON BOTH SIDES		
FORWARD GLASS TAPED		
NO TRIM RINGS / HUB CAPS		
BRAKE LIGHTS OPERATE - ALL CARS		
TIRES UNDER FENDERS		

INTERIOR	PASS	FAIL
ALL LOOSE OBJECTS REMOVED		
SPARE TIRE REMOVED / SECURED		
METAL / METAL SEAT BELTS		
DRIVER'S SEAT SECURE		
ROLL BAR (OPEN CARS)		
REAR & SIDE VIEW MIRRORS IN PLACE		

UNDER HOOD	PASS	FAIL
ACCELERATOR RETURN SPRING		
BATTERY SECURE		
BRAKE FLUID SUPPLY		
NO FLUID LEAKS		
HOOD LATCH SECURE		

SUSPENSION	PASS	FAIL
BALL JOINTS		
WHEEL BEARINGS		
ALL LUGS AND STUDS PRESENT		
TIRE CONDITION (INCLUDING SIDEWALL)		
WHEELS O.K - MULTI LUG PROHIBITED		

HELMET/ CLOTHING	PASS	FAIL
1990 / 1995 SNELL STICKER (DOM <10 years)		
OVERALL CONDITION		
FACE SHIELD / GOGGLES (OPEN CARS)		
NOMEX SUIT (FORMULA & MODIFIED DRIVERS)		

BRAKE PEDAL	PASS	FAIL
HEIGHT		
FIRMNESS		

Date and signature of Dealer or Garage that completed the inspection.

Signature _____ **Date** _____

Drivers Signature _____ Date _____

PASS _____ FAIL _____ TECH INSPECTOR _____

TECH. INSPECTION SHEET-TECH INSPECTOR RETAINS THIS FORM

[BACK TO Time Trial Page](#)

[Back to C.A.R.T Home Page](#)