



Confidential

Make and type of vehicle	
Registration number	
VIN/Chassis number	
Location observed	
Date observed	Time observed
Nature of defects (actual condition must be stated)	
.....	
.....	
.....	
Reported by	
Name	
Address	
Examiner No. (AIS only).....	Date reported ___/___/___
Approved Inspection Station details (if reported by an AIS)	
Station No.....	Certificate No.....
Not return for second inspection <input type="checkbox"/>	Fail second inspection <input type="checkbox"/>
(Department of Transport and Main Roads' use only)	
Action to be taken	
.....	
Authorised by	
<small>Privacy statement: The department collects this information under the <i>Transport Operations (Road Use Management) Act 1995</i> to manage the incidences of defective vehicles on the state's roads. This information may be released by the department or its agents to statutory entities and interstate registering authorities. This information is also accessible by authorised departmental officers. The department will not disclose your personal details to any other third party without your consent unless required or authorised by law.</small>	



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