



Safety Inspection 'ATV' Vehicle Type Request Form

Inspector Name: _____ Inspector Number: _____

Inspector Mailing Address: _____

Current inspector vehicle categories: Heavy Truck PLT Motorcycle

Station Name: _____ Station Number _____

Station Physical Address: _____

Station Mailing Address: _____

I (Print Name) _____ request that the 'ATV' vehicle type be added to my current safety inspection certification, so that I may conduct Street-Legal ATV Inspections. I understand that I must also be already certified to conduct motorcycle inspections in order for this request to be processed.

Inspector Signature _____

OFFICE USE ONLY

Data Entered:	Initials: _____
Added to address List:	Initials: _____
New Inspector Card	Initials: _____
New Station License	Initials: _____