

Airside Vehicle Safety Inspection Certificate

Vehicle Owner:

Name:

Street Address:

City: State Post Code

Vehicle Details:

Make

Model:

Class:

ID Number

Inspection Checklist:

Pass:

Vehicle ID

Brakes

Steering & Suspension

Wheels & Tyres

Body Condition

Seats

Head Lights

Tail Lights

Rotating Beacon

Engine/driveline

Inspecting Engineer or Mechanic:

Name:

Street Address:

City: State Post Code

Pass:

Fail:

I certify that I have inspected the vehicle and that this is a true record of the vehicles compliance with the inspection standard at The time of inspection:

Examiners Signature:

Examiner's Number:

Date:

Bankstown Airport Limited

3 Avro Street Bankstown Airport NSW 2200
Tel (02) 9796 2300 Fax (02) 9791 0230
ABN 50 083 058 637

Camden Airport Limited

3 Avro Street Bankstown Airport NSW 2200
Tel (02) 9796 2300 Fax (02) 9791 0230
ABN 23 083 056 464