



**HASTINGS AUTO RESTORERS SOCIETY INC.
PRE-REGISTRATION CHECK LIST.**

Make..... Year..... Owner.....
Address.....
..... Postcode.....
Registration Plate No. Model..... Colour.....
Vin/Chassis No..... Engine No.....
Insurance Company Name..... Policy No.....

PLEASE ENSURE THAT THE ITEMS RELEVANT TO YOUR VEHICLE LISTED BELOW ARE ROADWORTHY AND CHECKED BY THE OWNER AND INSPECTOR.

	<u>Owner.</u>	<u>Inspector.</u>		<u>Owner.</u>	<u>Inspector.</u>
Bodywork/ Rust:.....	<input type="radio"/>	<input type="radio"/>	All Lights:.....	<input type="radio"/>	<input type="radio"/>
Battery Secure:.....	<input type="radio"/>	<input type="radio"/>	Glass :.....	<input type="radio"/>	<input type="radio"/>
Steering / Suspension....	<input type="radio"/>	<input type="radio"/>	Brake Pedal Pressure.	<input type="radio"/>	<input type="radio"/>
Exhaust:.....	<input type="radio"/>	<input type="radio"/>	Wheels:.....	<input type="radio"/>	<input type="radio"/>
Mirrors;.....	<input type="radio"/>	<input type="radio"/>	Windscreen/Wiper....	<input type="radio"/>	<input type="radio"/>
Oil Leaks:.....	<input type="radio"/>	<input type="radio"/>	Hand Brake:.....	<input type="radio"/>	<input type="radio"/>

Number of Entries in Log Book for Past Registration Period.

Please Record Number in this Box.

Comments:.....

I, [Print Name]....., as the registered operator of the above mentioned vehicle do declare this vehicle to be roadworthy , and take responsibility for the vehicle to be suitable for safe use , until the expiry date of conditional registration.

Signed:..... Date:.....

Registration Officers Signature:.....

**** Thank you for Your Co-operation to Ensure The Safety of Your Vehicle.****