



# 2017 Technical and Safety Inspection Form

Atlantic Region Motorsports Inc.

## DRIVER ONLY

Inspection Type

Date

Driver Name

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|                                 |          |          |     |
|---------------------------------|----------|----------|-----|
| Helmet (w/ name & sticker)      | Accepted | Rejected |     |
| Balaclava/Skirt (facial hair?)  | Accepted | Rejected |     |
| Goggles/Visor (open cars)       | Accepted | Rejected | N/A |
| Head & Neck Restraint           | Accepted | Rejected |     |
| Suit (material & certification) | Accepted | Rejected |     |
| Underwear (approved material)   | Accepted | Rejected |     |
| Gloves (approved material)      | Accepted | Rejected |     |
| Shoes (approved material)       | Accepted | Rejected |     |
| Socks (approved material)       | Accepted | Rejected |     |

Notes

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### This Area Tech Inspector Only

Driver Gear Approved                      Yes              No

Sticker Issued                                Yes              No

Date Issued

Tech Inspector

Tech Inspector Stamp