

Annual Inspector Qualification

**This form must be on file for each individual who performs an annual vehicle inspection.*

I certify that the following individual:

Understands the inspection criteria set forth in Part 393 and Appendix G and can identify defective components.

Is knowledgeable of and has mastered the methods, procedures, tools and equipment used when performing an inspection.

Is capable of performing an inspection by reason of experience, training, or both, and qualifies in one of the following categories (check all that apply):

Successfully completed a State or Federal training program or has a certificate from a State or Canadian Province which qualifies the person to perform commercial vehicle safety inspections.

Specify: _____

Has a combination of training or experience totaling at least one year as follows:

Participation in a truck manufacturer-sponsored training program or similar commercial training program designed to train students in truck operation and maintenance.

Where and Dates: _____

_____ (years) experience as a mechanic or inspector in a motor carrier maintenance program.

Name and Dates: _____

_____ (years) experience as a mechanic or inspector in truck maintenance at a commercial garage, fleet leasing company, or similar facility. Name of Facility and Dates:

Name and Dates: _____

_____ (years) experience as a commercial vehicle inspector for a State, Provincial, or Federal Government.

Where and Dates: _____

I certify the above information is true and accurate to the best of my knowledge.

Employee Name	Employee Signature	Date
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Company Representative	Representative Signature	Date
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Evidence of Inspector Qualifications are on file at: _____

**If the above is an employee of the motor carrier, attach their resume to this form.*