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## ANNUAL VEHICLE INSPECTION – INSPECTOR CERTIFICATION

M&R VENDOR: \_\_\_\_\_ DATE: \_\_\_\_\_

LOCATION: \_\_\_\_\_

City, state zip \_\_\_\_\_

Name of Inspector: \_\_\_\_\_ Employee ID: \_\_\_\_\_

### 396.19 Inspector Qualifications

It shall be the M&R vendor's responsibility to ensure that the individual(s) performing an annual inspection under 396.17 is qualified as follows:

1. Understands the inspection criteria set forth in 49 CFR Part 393 and Appendix G of this subchapter and can identify defective components.
2. Is knowledgeable of and has mastered the methods, procedures, tools and equipment used when performing an inspection; and
3. Is capable of performing an inspection by reason of experience, training, or both as follows:

### I AM QUALIFIED TO PERFORM AN ANNUAL INSPECTION OF INTERMODAL EQUIPMENT BASED ON THE FOLLOWING:

(Check and complete the appropriate sections)

\_\_\_\_ a). Successfully completed a State or Federal sponsored training program or has a certificate from a State which qualifies this person to perform Intermodal equipment safety inspections.

Name for Program/Certificate \_\_\_\_\_ Date \_\_\_\_\_

Location \_\_\_\_\_

OR

\_\_\_\_ b). Have a combination of training or experience totaling at least one (1) year. Training and/or experience may consist of:

1. \_\_\_\_ Participation in a truck manufacturer sponsored training program or similar commercial training program designed to train students in truck operations and maintenance.

Name of Program \_\_\_\_\_ How Long? \_\_\_\_ Yrs \_\_\_\_ Mo

OR

2. \_\_\_\_ Experience as a mechanic or inspector working on Intermodal Equipment;

Name of M&R Vendor for which you worked \_\_\_\_\_ Total Yrs/Mo \_\_\_\_\_

OR

3. \_\_\_\_ Experience as a mechanic or inspector in truck/chassis maintenance at a commercial garage, leasing company or similar facility;

Name of Facility: \_\_\_\_\_ Total Yrs/Mo \_\_\_\_\_

OR

4. Experience as a commercial inspector for a State or Federal agency.

Name of Government Agency \_\_\_\_\_ Total Yrs/Mo \_\_\_\_\_

Signature of Inspector \_\_\_\_\_ Date \_\_\_\_\_

I hereby certify that the mechanic/inspector mentioned above meets the requirements for a qualified inspector to perform the annual vehicle Inspection in compliance with the US Department of Transportation regulations for qualified inspectors.

Name of Owner/Supervisor (Print) \_\_\_\_\_

Signature of Owner/Supervisor \_\_\_\_\_ Date \_\_\_\_\_