



COMPETITOR AUDIT DECLARATION (CAD)

DUBBO CITY CAR CLUB

I (The Competitor)

I/hereby state that I or my agent have inspected this vehicle against all items on this form and confirm that the entered vehicle complies with all relevant minimum Safety and Class Eligibility requirements as detailed in the IHRA Australia Rule Book. The vehicle will be available for compliance Audits as requested by the appointed Officials.

Licence N^o

Eliminator

Class

Is this your first time Competing or Driving this vehicle?

Yes

No

If you answered "Yes" please see an IHRA Australia Steward before proceeding.

Items Checked

Not Applicable

Category One - Safety Critical Mandatory that all items must comply prior to sign off

- | | | |
|---|--|--|
| <input type="checkbox"/> Helmet Standard: _____ | <input type="checkbox"/> Driveline Protection Tailshaft Loop | <input type="checkbox"/> Supercharger Belt Guard |
| <input type="checkbox"/> Safety Harness Date: _____ | <input type="checkbox"/> Clutch & Flywheel Compliant | <input type="checkbox"/> Supercharger Restraints |
| <input type="checkbox"/> Protective Clothing; Suit-Boots-Gloves | <input type="checkbox"/> Throttle Return | <input type="checkbox"/> Cooling System |
| <input type="checkbox"/> Underwear- All vehicles with a POWER ADDER | <input type="checkbox"/> Fuel Shut Off (Mechanical Fuel Injection) | <input type="checkbox"/> Liquid Overflow |
| <input type="checkbox"/> Frontal Head / Neck Restraint | <input type="checkbox"/> Steering System / Steering Extension | <input type="checkbox"/> Parachute Canopy |
| <input type="checkbox"/> Roll Cage Padding (SFI 45.1 or FIA) | <input type="checkbox"/> Rod Ends (no grease nipples) | <input type="checkbox"/> Parachute - Cables - Lever and End Caps |
| <input type="checkbox"/> Arm Restraints or Window Net | <input type="checkbox"/> Suspension Components | <input type="checkbox"/> Seat Mounting (Positive Lock) (Back Support) |
| <input type="checkbox"/> Lower Engine Containment | <input type="checkbox"/> Axles _____ | <input type="checkbox"/> Wheelie Bars |
| <input type="checkbox"/> Auto Transmission Shield | <input type="checkbox"/> Firewall | <input type="checkbox"/> Clutch / Chain Guard - Bikes / Junior Classes |
| <input type="checkbox"/> Bellhousing Shield | <input type="checkbox"/> Brakes | <input type="checkbox"/> Lanyard / Ignition Kill |
| <input type="checkbox"/> Battery / Mounting | <input type="checkbox"/> Wheels and Tyres | <input type="checkbox"/> Rear Tail Light (RED) |
| <input type="checkbox"/> Battery Isolation | <input type="checkbox"/> Wheel Stud (Length Compliant) | <input type="checkbox"/> Fuel Tank / Cell - Mounting - Fuel Lines |
| <input type="checkbox"/> Auto Transmission Lockout | <input type="checkbox"/> Nitrous Oxide Bottle Mounting | <input type="checkbox"/> Tech Inspection Label |
| <input type="checkbox"/> Neutral Safety Switch (Auto Trans) | <input type="checkbox"/> Nitrous Oxide Vent - External | <input type="checkbox"/> REAL STREET TYRE COMPLIANCE |

- | | | |
|--|--|---|
| <input type="checkbox"/> Nitrous Oxide NO ₂ Decal | <input type="checkbox"/> Valve Caps (metal) | <input type="checkbox"/> Window Tint Compliant |
| <input type="checkbox"/> Battery Isolation / Decal Triangle | <input type="checkbox"/> Race Number Compliant (size visually) | <input type="checkbox"/> Fire Extinguisher Vehicle or Tow Vehicle |

COMPETITOR DECLARATION: I declare that I have completed this form truthfully, if it is found that I have not completed this form correctly I am liable for disciplinary action as stated in the IHRA Australia rule book.

Signature: _____ I am the: Adult Competitor Parent Legal Guardian

I further declare that this form has been completed and signed by the relevant adult competitor or, where the form relates to all Junior Competition vehicles, by the Parent or Legal Guardian responsible for that Junior competitor.

Official's Checks

- | | | |
|--|--|---|
| <input type="checkbox"/> Holds appropriate Licence (for class) | <input type="checkbox"/> Logbook checked for outstanding entries | <input type="checkbox"/> Indemnity Statement completed |
| <input type="checkbox"/> Licence is valid Expiry Date: _____ | <input type="checkbox"/> Compliance sticker issued | <input type="checkbox"/> Competitor signature witnessed |
| <input type="checkbox"/> Logbook is valid Expiry Date: _____ | <input type="checkbox"/> Competitor Entry details confirmed | <input type="checkbox"/> WRISTBAND ISSUED |
| <input type="checkbox"/> Medical Expiry Date: _____ | | |

OFFICIAL'S DECLARATION: In signing this form as an Official, I declare that I am satisfied that the competitor has completed the CAD form where necessary.

Official's Name: _____ Signature: _____ Date: _____