Roadworthy Certificate for Motor Vehicles

Number Plate _____

Make _____ Model _____

Mileage _____

Checks Carried Out	Pass	Fail	Comments
Seats & Seat Belts			
Horn			
Lights and switches			
Front View – washer and wiper			
Tyres and wheels			
Wheel alignment			
Clutch system			
Accelerator system			
Braking System			
Steering and suspension			
Transmission and final drive			
Doors, bonnet, boot and mirrors			
Exhaust system			
Fuel system			
Structure & General Condition			

Date of Test _____

Test Location _____ Town/City _____

Tester -Print Name _____ Signature _____

I have witnessed the test being undertaken:

Witness - Print Name _____ Signature _____