



SCC TECHNICAL INSPECTION FORM

EVENT _____ DATE _____ DRIVER-_____

CAR MAKE: _____ MODEL _____ YEAR _____ CAR NUMBER _____

INSTRUCTIONS (*Read carefully*): Prior to bringing your car to the track or to the HPDE tech station, inspect each item on the car as listed. Consult a tech inspector if there are any questions. Have the top of the form filled out **prior** to going to the tech inspector. Making sure your car is track ready is **your** responsibility. More information and all rules are available online at www.drivenasa.com.

WHEELS & TIRES

_____ Tires in good condition, less than 5 years old
_____ Lug nuts (present & tight)

STEERING & SUSPENSION

_____ Wheel bearings, tight/no play
_____ No steering wheel play
_____ 4 Shocks in good condition
_____ Springs in good condition
and appropriate for track

ENGINE

_____ No fluid leaks
_____ Radiator overflow tank
_____ Radiator hoses and clamps
_____ Battery secured, no bungees
_____ Terminals covered
_____ No Antifreeze allowed on
any track. Suggest Water Wetter or
equivalent.

Roll Cage

_____ Padding for contact areas
_____ Rear View Mirror
_____ Drivers Side Mirror

BRAKES/CLUTCH

_____ Pedal pressure
_____ Fluid levels optimal
_____ Lines in good condition

SAFETY EQUIPMENT

_____ Harness in good condition/installed correctly, SFI
dated within 4 years. Recommended 5-point
_____ Helmet (Snell SA2011) or newer
_____ Eye Protection Required (Full Face/Goggles)
_____ Properly installed seat, Recommended mounting
to frame/roll cage. No Floor mounted seats unless
factory.
_____ Safety Cut off Switch located on dash or easy
access by driver/ crew.
_____ Mounted in car fire extinguisher, 2lb min with
metal bracket
_____ Window net in good condition
_____ Fuel Cell securely mounted in good condition
_____ Fuel Cell Roll Over Flapper Valve
_____ Fuel Cell gas cap secure
_____ Driver Suit SAF 3.2/A1 or Higher Rating
_____ Driver Shoes SFI/FAI Rated or Leather with no
holes
_____ Gloves SFI/FAI Rated
_____ Race Receiver and Ear Buds for every driver.
Test Freq 454.000 with Race Control before
going on track.
_____ Portable fire extinguisher in every Pit/Fueling
location
_____ Two Wheel Chocks for use when parked.

I have inspected the above vehicle and take full responsibility for its condition on the track.

OWNER SIGNATURE: _____ DATE _____

Inspectors stamp

Inspector's comments (list any violations)
