MotorSport New Zealand
Live life faster

SAFETY AUDIT WORKSHEET – Form T021

EVENT: **DATE:**

Car No.	Class / Schedule	SAFETY CRITICAL ITEMS Choose minimum of 3 inspection items				SAFETY NON-CRITICAL ITEMS Choose minimum of 3 inspection items				NON-SAFETY ITEMS Choose as appropriate	
10											
20											

CHIEF SCRUTINEER: **LICENCE No.**