###### NOTICE OF REPAIR

###### SAFETY CAGE/ROLLBAR REPAIR APPLICATION

###### Technical Form – T005

**Preamble:**

Where damage has been sustained to a Schedule A homologated or Schedule AA approved Safety Cage or Safety Rollbar, repairs may be authorised by the MSNZ Technical Department. It is also possible under a ‘Notice of Repair’ to remove a homologated safety cage from a damaged bodyshell for re-installation into a ‘new’ bodyshell.

**Note:** In the case of International and Type Approval Certifications it is imperative that contact is made with the MSNZ Technical Department in the first instance as an inspection/inspection report will be required prior to any repairs commencing and all repair work MUST be performed by the original manufacturer/constructor.

##### Important Information:

* Initially contact the MSNZ Technical Department for approval/guidance prior to any repair work commencing.
* Repairs may only be performed by the original safety cage manufacturer / constructor (as detailed on the homologation certificate) or with their written permission or (failing that) with permission from the MSNZ Technical Department. In all instances it is wise to contact the MSNZ Technical Department in the first instance for advice.
* An inspection (prior to repair) is normally required and this must be performed by a MSNZ appointed official. Detail of this requirement (and any associated costs) will be advised upon initial contact with the MSNZ Technical Dept.
* This form must be completed in full by the ‘repairer’ and submitted with photographs of the structure prior to and post repair to the MSNZ Technical Department.
* Any damaged tube members shall be replaced in their entirety.
* All material used shall respect the original specification and dimensions of the originally homologated structure or as approved in writing by the MSNZ Technical Department.
* If there are any changes made during the repair to the original specification and dimensions of the originally homologated structure then approval must be authorised by the MSNZ Technical Department prior to the repair commencing.
* If repair requires the replacement of the entire bodyshell then a physical inspection will be required by a member of the MSNZ Technical Department or a licensed Technical Officer / Advisor. The recording of the new chassis number will be required on the ‘Notice of Repair’ and the vehicles’ MSNZ Competition Logbook notated accordingly.
* There is no fee charged for a ‘Notice of Repair’ Application.

**Application Notes:**

The vehicles’ MSNZ logbook MUST be submitted with this completed application.

##### SECTION TWO: A CLEAR and ACCURATE line drawing must be provided and all members that have been subject to the repair must be identified by shading them in.

##### SECTION THREE: Detail only the NEW members that have been subject to change during the repair. Additionally detail of the mounting material/specifications are only required if they are part of the repair. Reference all new members by numbers on the drawing in Section Two. The material description, material standard, and the material specifications must be provided in Section Three.

* SECTION FOUR: Declaration – In all cases (except where authorisation is granted by the MSNZ Technical Department) must be completed by the manufacturer of the original structure and must be signed accordingly to confirm compliance with these prescriptions and those of Schedule A/AA.
* SECTION FIVE: Detailed photographs MUST be supplied of the UN-PAINTED repair area/s and they MUST be CLEAR and CLOSE-UP views. Additionally, an overall view of the repaired structure MUST be included.

NOTE: Quality digital photos are accepted either on a CD or e-mailed to technical@motorsport.org.nz

###### NOTICE OF REPAIR

###### SAFETY CAGE/ROLLBAR REPAIR CERTIFICATE

###### Technical Form – T005

# SECTION ONE –OWNER / VEHICLE DETAILS

Application Date: \_ \_ / \_ \_ / \_ \_ \_ \_ Vehicle Owners Names: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Email Address: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Daytime Phone No.: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Postal Address: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Manufacturer: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Model: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Yr of Manufacture: \_ \_ \_ \_ \_ \_ \_ \_

Vehicle Chassis No.: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Registration No.: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

#  SECTION TWO – SAFETY CAGE/ROLLBAR DRAWING *(line drawing of actual structure)*

**NOTE:** Drawing to be accurate representation of actual structure installed in vehicle clearly detailing **ALL** members. All repaired members must be identified by SHADING IN.

|  |
| --- |
|  |

SECTION THREE – MATERIAL SPECIFICATION

**NOTE:** Only new (replaced) members (as shaded in Section Two drawing) need to be detailed using their member reference numbers.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Member number** | **Member name** | **Material****Description / Standard** | **Outside Diameter****(mm)** | **Wall Thickness****(mm)** | **Tensile Strength (MPa)** |
| **1.** |  |  |  |  |  |
| **2.** |  |  |  |  |  |
| **3.** |  |  |  |  |  |
| **4.** |  |  |  |  |  |
| **5.** |  |  |  |  |  |
| **6.** |  |  |  |  |  |
| **7.** |  |  |  |  |  |
| **8.** |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Main rollbar** | **Lateral / Front rollbar** | **Backstays** |
| **Reinforcement Plate** | Material:Thickness: mmArea: cm2 | Material:Thickness: mmArea: cm2 | Material:Thickness: mmArea: cm2 |
| **Footing Plate / Box** | Material:Thickness: mmArea: cm2 | Material:Thickness: mmArea: cm2 | Material:Thickness: mmArea: cm2 |
| **Notes:** |

SECTION FOUR – DECLARATIONS

|  |
| --- |
| **DECLARATION BY MANUFACTURER / REPAIRER** |
| Repairs to a homologated safety structure shall only be performed by the ORIGINAL MANUFACTURER of the safety structure (or in extenuating circumstances with written consent from the MSNZ Technical Department) |
| Company Name: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Phone No.: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ E-mail: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Physical Address: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ |
| I hereby declare that the repairs performed on the homologated structure as described on this form, have been performed in total conformity with the prescriptions of this application and the specified requirements of Appendix Two Schedule A Part One Article 4.6 and Part Two Article 5 of the current MotorSport Manual.Name: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Position in Company: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_Signature: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ **Qualifications: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_** |

SECTION FIVE – INSPECTION REPORT

|  |
| --- |
| **An inspection report is generally required (although this will be confirmed upon initial contact with the MSNZ Technical Dept.** **This report is to be completed by a MSNZ Technical Officer / Advisor**  |
| * The safety cage (damage) was inspected prior to the repair
* The safety cage was inspected post the repair
* The construction / design is in compliance with the specifications of Schedule A (current at time of homologation)
* The tube used in the repair is confirmed as meeting the size/strength requirements of the original homologation
* The structure has been professionally repaired and is (overall) in an acceptable condition
* Clear, close-up pictures of the specified areas of the repaired structure are provided
* Additional inspection notes as follows:

**Notes;** |
| Name: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ MSNZ Officials Licence No.: \_ \_ \_ \_ \_ \_ \_ \_Signature: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Dated: \_ \_ \_ \_ \_ \_ \_ \_ Acceptance stamp: |