SAFETY AUDIT SUMMARY

Please complete at the end of your Safety Audit programme and scrutineering duties to the Clerk of the Course together with the Programme, Worksheets and any Reports.

**Event:**  **Venue:**

**Classes / Schedules:**  **Date:** / /

**Total Vehicles Competing:**   **Total Vehicles Audited:**

# REPORT SUMMARY:

**Recommendations:**

Continue on reverse

**NON COMPLIANCE DETAILS (Logbook Entries)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Vehicle**  **Number** | Vehicle Schedule | **Audit Result** | Safety Critical | Safety Non-Critical | **Non-Safety** |
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**Scrutineers on duty:**

**Chief Scrutineer:** Name / No. ……………………………… Signature