Coastal Empire Region PCA
DRIVER EDUCATION
****TECH FORM****

Top half must be completed before you arrive at the track!
Bottom half is for our Tech Team – bring this with you.
After the Tech Team signs off, please turn it in for your welcome pack.

NOTE: The participant is primarily responsible for the safety of his or her car and should know the condition of the items on this list. Inspector not held liable for the safety of the vehicle.

Car Owner Signature: _____ **PRINT NAME:** _____
Car Year/Make/Model/Color_____ **PHONE NUMBER:** _____

PRE-TECH INSPECTION MUST BE DONE PRIOR TO THE EVENT BY QUALIFIED MECHANIC/TECHNICIAN INCLUDE SHOP'S TELEPHONE NUMBER

Vehicle Interior	**APP**	**REJ**
Interior Rearview Mirror	___	___
Seat Belts/Harnesses (no 4 pt)	___	___
Fire Extinguishers (optional)	___	___
Pedals in Good Condition	___	___
Brake Pedal Firm	___	___
Roll bar required for open cars	___	___

Suspension & Running Gear	**APP**	**REJ**
Steering Linkage	___	___
Suspension & Shocks	___	___
Wheel Bearings (tight)	___	___
Brake Lines (dry, secure, no cracks)	___	___
Brakes Fluid Reservoir (full)	___	___
Wheels (straight, no cracks)	___	___
Break Calipers (dry, clean)	___	___

Vehicle Exterior	**APP**	**REJ**
Brake Lights	___	___
Electrical Harness	___	___
No Cracked Glass	___	___
No Excessive Rust	___	___
Exterior Side view Mirror	___	___
Windshield Wipers	___	___
Gas Cap Secure Seal	___	___
Tire (no cording) Pressure Front	___	___
Rear	___	___
Sufficient Brake Pads (3/16" min)	___	___

Engine & Trunk Compartments	**APP**	**REJ**
Battery Secure	___	___
Motor Mounts (no cracks)	___	___
Relays Secure	___	___
Fan Belt (good condition, no cracks)	___	___
Throttle Linkage (no sticking or play	___	___
Oil & Fuel Lines (Dry & Secure)	___	___
No Fluid Leaks (Engine & Suspension)	___	___
No excessive smoking	___	___
Hood & Deck Lids Secure	___	___

MECHANIC'S NAME: _____ **DATE INSPECTED:** _____
SHOP'S NAME_____ **PHONE NUMBER**_____

FINAL LOOSE CHANGE INSPECTION (DONE AT THE TRACK)

	APP	**REJ**		**APP**	**REJ**
Tires in Good Condition	___	___	Valve stem and Ctr. Caps Check Secured	___	___
Lug Nuts (Torque to specs)	___	___	Appropriate Natural Fiber Clothing	___	___
Hub caps removed	___	___	Rubber-soled shoes	___	___
No Loose Objects in Car Compartments	___	___	Helmet Snell SA2000/05	___	___
Brake Lights Operable	___	___	Car # attached to both doors or windows	___	___
Equal Seats and Restraints (no 4 pts)	___	___	Assigned Car Number	___	___
ABC or BC Fire extinguisher 10 lbs min	___	___			

INSPECTOR'S NAME_____ **DATE INSPECTED:** _____

Bring this signed form and your driver's license to Registration