



SAFETY INSPECTION CERTIFICATION FOR MOTOR CARRIER VEHICLES

For Department Use Only
PennDOT - P.O. Box 68674 - Harrisburg, PA 17106-8674

As part of your restoration requirements, you must complete all the information below and return to PennDOT.

A APPLICANT INFORMATION - This section to be completed by the vehicle owner.

Last Name (or Full Business Name)		First Name	Middle Name	PA DL/Photo ID# or Bus. ID#	Date of Birth
Street Address			City	State	Zip Code

B VEHICLE INSPECTION INFORMATION - This section to be completed by the inspecting station/mechanic.

Inspection Station Number	Inspection Station Name		Inspection Date	Inspection Expiration
Inspecting Mechanic's Name		Mechanic Number	Mechanic Type	Mechanic Expiry Date
Vehicle Identification Number	Title Number	Plate Number	Sticker Number Affixed to the Vehicle	

ATTENTION INSPECTOR: In addition to the sticker affixed to the vehicle at the time of inspection, an additional inspection sticker must be affixed to this form and submitted to PennDOT. The sticker should be cut in half and the half containing the serial number should be affixed in the space below. Please ensure that the sticker is properly secured to this form by covering it completely with clear adhesive tape. The remaining portion of the sticker should be maintained with your inspection records. When entering this sticker in your records, indicate the vehicle owner's name, address, insurance information, the vehicle title number, registration number, VIN, year, make and body style. In the check-block area of your report form, write "AFFIXED TO INSPECTION CERTIFICATION FORM."

**CUT AND AFFIX THE INSPECTION
STICKER SO THE SERIAL NUMBER
IS VISIBLE. IT IS NOT NECESSARY
FOR THE STICKER PREFIX
(FOR EXAMPLE SI7) TO BE VISIBLE
ON THE PORTION OF THE STICKER
AFFIXED TO THIS FORM.**

I certify under penalty of law that ALL information contained herein is TRUE and CORRECT and that I understand that any misstatement of fact is a misdemeanor of the third degree punishable by a fine up to \$2,500 and/or imprisonment up to 1 year (18 Pa.C.S. Section 4904[b]).

_____ Inspecting Mechanic's Signature

I/We certify under penalty of law that ALL information contained herein is TRUE and CORRECT and that I/we understand that any misstatement of fact is a misdemeanor of the third degree punishable by a fine up to \$2,500 and/or imprisonment up to 1 year (18 Pa.C.S. Section 4904[b]).

_____ Vehicle Owner's Signature _____ Vehicle Co-Owner's Signature

Visit us at www.dmv.pa.gov or call us at:

In state: 1-800-932-4600 ♦ TDD: 1-800-228-0676 ♦ Out-of-State: 1-717-412-5300 ♦ TDD Out-of-State: 1-717-412-5380