



TECH INSPECTION

This form is only for National Pro, Pro Lite & Sport riders. This form is per sled. Anytime there is a change, you must update the form and resubmit to Tech.

DRIVERS NAME: _____ BIB#: _____ CLASS ENTRY: _____

MACHINE MAKE: _____ MODEL: _____ YEAR: _____ CC: _____

CHASSIS SERIAL #: _____ ENGINE SERIAL #: _____

WHAT YEAR IS THE MOTOR YOU ARE RUNNING? _____

TRACK BRAND, PART & SERIAL #: _____

STUD BRAND & PART #: _____

REED VALVE BRAND _____

FUEL SAMPLE INFORMATION

WHAT BRAND OF FUEL ARE YOU USING? _____

IF BLENDING PUMP AND RACE GAS, WHAT RATIO ARE YOU BLENDING? _____

IF USING PUMP GAS, WHERE ARE YOU BUYING THE PUMP GAS FROM? (Pro Lite) _____

WHAT OCTANE ARE YOU RUNNING FROM THE PUMP? _____ DOES THE PUMP GAS HAVE ETHANOL IN IT? ___YES ___ NO

WHAT TYPE OF OIL ARE YOU USING? _____ WHAT OIL RATIO ARE YOU MIXING? _____

ARE YOU USING ANY ADDITIVES? ___YES ___ NO IF YES, WHAT ADDITIVE? _____

ARE THE FUEL AND OIL YOU ARE USING COMMERCIALY AVAILABLE? ___YES ___ NO

DATE: _____ DRIVERS SIGNATURE: (required) _____

MECHANIC SIGNATURE: (required) _____

CREW CHIEF SIGNATURE: (required) _____

NOTES: