



HIGH DESERT OFF-ROAD

High Desert Off-Road

Annual Tech Inspection Form

Name: _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

Vehicle Specifications

Year: _____ Make: _____ Model: _____

Motor: _____ Tranny: _____ Tcase(s): _____

Modifications: _____

Technical Inspection

Required Equipment

DATE _____

- _____ Valid Drivers License
- _____ Minimum Liability Insurance
- _____ Working CB Radio
- _____ Approved Tow Straps, Rope or a Winch
- _____ Secure Anchor Points (front and rear)
- _____ Safety Belts or Harness for Each Occupant
- _____ Full Size Spare Tire and Compatible Lug Wrench
- _____ Functional Jack Capable of Lifting Your Vehicle
- _____ Working Headlights, Taillights and Brake Lights
- _____ Fire extinguisher

Recommended Equipment

- | | |
|-------------------------------------|------------------------|
| _____ First Aid Kit | _____ Basic Hand Tools |
| _____ Duct/Electrical Tape | _____ Jumper Cables |
| _____ Tie Wraps or Bailing Wire | _____ Spare Parts |
| _____ Assorted Spare Fuses | _____ Shovel 4ft + |
| _____ Tire Repair Kit or Fix a Flat | _____ Emergency Flares |
| _____ Extra Fluids | _____ Leather Gloves |
| _____ Flashlight | |
