



COMPETITOR AUDIT DECLARATION

I (the competitor)

of:

hereby state that I or my agent have inspected the vehicle against all items on this form and confirm that the entered vehicle complies with all relevant minimum Safety and Class Eligibility requirements as detailed in the IHRA Rulebook. The vehicle will be made available for Compliance Audits as requested by the appointed Officials.

Licence No Eliminator

Class

Category One – Safety Critical

- | | | |
|---|--|---|
| <input type="radio"/> Helmet STD/DATE | <input type="radio"/> Steering system | <input type="radio"/> Throttle Return |
| <input type="radio"/> Protective Clothing | <input type="radio"/> Suspension system | <input type="radio"/> Fire extinguisher |
| <input type="radio"/> Safety Harness DATE | <input type="radio"/> Seat and mountings | <input type="radio"/> Fire System |
| <input type="radio"/> Roll over protection | <input type="radio"/> Wheels/Tyres | <input type="radio"/> Braking system |
| <input type="radio"/> Bellhousing/Auto Trans Shield | <input type="radio"/> Fuel Shutoff | <input type="radio"/> Supercharger Restraints |
| <input type="radio"/> Cyl Head Restraints | <input type="radio"/> Tech Inspection | <input type="radio"/> Wheelie Bars |
| <input type="radio"/> Clutch / Chain Guard | <input type="radio"/> Parachutes | <input type="radio"/> Lanyard / Ignition Kill |

Category Two – Safety Non Critical

- | | | |
|--|---|-----------------------------------|
| <input type="radio"/> Engine & Transmission | <input type="radio"/> Fuel tank / fuel cell | <input type="radio"/> Fuel Lines |
| <input type="radio"/> Clutch & Flywheel | <input type="radio"/> Liquid Overflow | <input type="radio"/> Wing Mounts |
| <input type="radio"/> Neutral Safety Switch (auto trans) | <input type="radio"/> Lower Engine Containment Device | |
| <input type="radio"/> Battery/Battery Mounting | <input type="radio"/> Lubrication & Cooling System | |
| <input type="radio"/> Battery Isolation Switch | <input type="radio"/> Firewall | |

Category Three – Class Compliance and Non Safety

- | | |
|--|--|
| <input type="radio"/> Engine capacity & components | <input type="radio"/> Supercharger Overdrive% |
| <input type="radio"/> Transmission Type | <input type="radio"/> Supercharger is not modified from OEM specifications |
| <input type="radio"/> Body Dimensions & Aerodynamics | <input type="radio"/> Supercharger is IHRA approved type only Electronic devices |
| <input type="radio"/> Licence Number & Class displayed | <input type="radio"/> No reactive control devices employed or fitted |
| <input type="radio"/> General vehicle presentation | <input type="radio"/> Fuel Additives |
| <input type="radio"/> Fuel Blend | |

√ = Item checked X = Not applicable * Please note Fuel Blend and Supercharger overdrive

COMPETITOR DECLARATION: I am aware that where any breach of the Rules or Regulations of IHRA is found during a Compliance Audit I render myself liable to Tribunal Action and/or appropriate penalties and my signature below indicates my acceptance of this undertaking.

Competitors Signature: _____ Date: _____

Officials Checks

- | | |
|---|--|
| <input type="radio"/> Holds appropriate Licence | <input type="radio"/> Confirm competitor entry details |
| <input type="radio"/> Licence is valid | <input type="radio"/> Completed Indemnity Statement |
| <input type="radio"/> Logbook is valid | <input type="radio"/> Witness competitor signature |
| <input type="radio"/> Logbook checked for outstanding entries | <input type="radio"/> Armband issued |
| <input type="radio"/> Compliance sticker issued | |

OFFICIALS DECLARATION: In signing this form as an official I declare that I am satisfied that the competitor has correctly completed the ESP form where necessary

Officials Name

Signature: _____ Position: _____