## DRIVER/VEHICLE EXAMINATION REPORT

JIC

**Washington State Patrol** 

Commercial Vehicle Enforcement Section

P.O. Box 42614

Olympia, WA 98504-2614

(360) 596-3815 safetynet@wsp.wa.gov

Report Number: WAU008000317

Inspection Date: 03/20/2018

Start: 02:17 PM PT End: 3:01:52 PM PT

Inspection Level: I - Full HM Inspection Type: None

Driver: MARSH, IAN FRANCIS MICAL

HAROLD LEMAY ENTERPRISES INC

4111 192ND ST E

TACOMA, WA 98446

USDOT#: 00545444 MC/MX#: 159255

State#:

Highway:

Phone#: (253)539-0060

Fax#:

MilePost:

Origin: TACOMA, WA

Destination:TACOMA, WA

Date of Birth: Shipper:

License#:

CoDriver:

License#:

Date of Birth:

Bill of Lading: Cargo: EMPTY

County: PIERCE, WA VEHICLE IDENTIFICATION

Location: 192ND ST E, TACOMA

Unit Type Make Year State

Plate # TR INTL 2006 WA B83001A

Equipment ID 1044

VIN 1HTWCAAN36J265115 33,000

CVSA # CVSA Issued # OOS Sticker

00053

State: WA

State:

**BRAKE ADJUSTMENTS** 1

Axle# Right

Left

1 1/4

Chamber C-20

2 2 L-30

**VIOLATIONS** 

Vio Code	Section	Unit	oos	Citation #	Verify	Crash	Violations Discovered
396.3A1T	396.3(a)(1)	1	Y	· · · · · · · · · · · · · · · · · · ·	U	N	Tires (general): Tire rubbing frame at time of inspection
393.209D	393.209(d)	1	N		N	N	Steering system components worn, welded, or missing: Wear on pitman arm, bent
393.45	393.45	1	N		. N	N	Brake tubing and hose adequacy: audible air leak right front axel
393.47E	393.47(e)	1	N		N .	N	Clamp or Roto type brake out-of-adjustment: front left axel brake out of adjustment

HazMat: No HM Transported.

Placard: No

Cargo Tank:

Special Checks: No Data for Special Checks.

Violations marked as our of service (OOS) must be repaired before vehicle (s) can be operated. If OOS for brake adjustment, all brakes must be within proper adjustment before vehicle (s) can be operated.

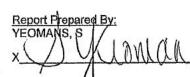
I certify that repairs were made.

Signature Of Repairer X:

The undersigned certifies that all violations noted on this report have been corrected and action has been taken to insure compliance with all applicable Federal and State regulations

Signature Of Motor Carrier X:

Date:



Badge #: **WAU586** 

Copy Received By: NCIS MICAL MARSH

