



Independent Vehicle Inspection Services
Impartial Vehicle Inspections



Phibblestown Road, Castaheaney Dublin 15, D15XET5

(Original) VIN:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Modifier/converter VIN (if applicable):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Registration Number:

--	--	--	--	--	--	--	--	--	--	--	--

Make: _____ **Model:** _____

Variant: _____ **Mileage:** _____ km Miles (tick one)

This report relates to a modification/repair (delete where appropriate)
In the case of a modification, give description of body-type before modification: and body-type after modification (if changed):
The purpose of the modification/repair is to: (give brief details of why these repairs or modifications were carried out to the vehicle)
List of the repairs or modifications made to the vehicle (including, but not limited to those involving changes to the braking systems, suspension, steering systems, bodywork, safety belts / restraint system, towing / coupling equipment, or chassis alterations):

In relation to the modifications/ repairs listed overleaf, provide a detailed description of each. (Please use another page where necessary).

Notes:

- Give full details of all changes to the braking system. Include a schematic diagram with key to the components and confirm on which axles that park brakes are fitted.
- Where available, list any type approval numbers related to the modified systems.
- Where available from the component/ system manufacturer, provide the supplementary evidence of compatibility with the type and variant of vehicle concerned.
- Details of the standard of workmanship and specifications (including certification provided by manufacturer / convertor, if available).

The following table must be completed for any vehicle modifications.

	Original		Modified	
EU Category				
EU Bodywork Code				
No. of seats (excluding driver)				
No. of doors				
Fuel/Power source				
Engine Capacity (cm ³)				
Engine Max. Net Power (kw)				
Engine Number				
Type-Approval Number				
DGVW (Design Gross Vehicle Weight) (kg)				
	Design weight	Suspension type	Design weight	Suspension type
Design Axle Weights (kg) and Suspension type. (air/coil/leaf/torsion bar)				
Axle 1				
Axle 2				

I declare the information provided in relation to the vehicle referred to in this report: **(tick) a)**

Is true and correct.

- b) That the modifications/repairs detailed above have been carried out to the vehicle such that the technical status and integrity of the vehicle and its components and safety features have not been compromised. That the vehicle is safe to be used on the road and the modification does not result in a danger to the vehicle occupants or other road users.
- c) That the vehicle meets with the Road Traffic (Construction, Equipment and Use of Vehicles) Regulations (as amended), the Road Traffic (Lighting of Vehicles) Regulations (as amended) and the Road Traffic (Construction and Use of Vehicles) Regulations (as amended).
- d) That the vehicle meets with the essential technical provisions of the EU Directives to which the modification relates for the year and category of vehicle concerned.

I declare that (tick one of the following 3 boxes and complete all of the information necessary):

• I am a “suitably qualified individual” (as per Note 2). The following details must be provided:

Mechanical Engineering/Technical Qualification (must be National Framework of Qualifications Level 7 or higher accredited course):

Level _____ University / Institute _____ Programme _____ Or Membership

Grade with Engineers Ireland, (Mechanical/Automotive engineer):

Membership number

--	--	--	--	--	--	--	--

Associate Chartered Fellow

Or

Membership Grade with Institute of Automobile Engineer Assessors:

Associate Member Fellow Honorary Fellow Membership number

--	--	--	--	--	--	--	--

Number of years’ experience (minimum 5) _____

Details of professional indemnity insurance (include company name (not broker), type of policy, expiry date)

• I am an authorised representative of an Approved Test Centre (ATC) as appointed by the National Standards Authority for Ireland.

ATC Number (Unique identifier issued by NSAI)

--	--	--	--	--	--	--	--

• I am the manufacturer/ authorised distributor/ convertor/modifier of the vehicle (delete as appropriate)

Convertor, modifiers – Provide details of professional indemnity insurance (include company name (not broker), type of policy, expiry date)

Complete ALL of the following IN BLOCK LETTERS and sign the declaration below.

Name of Certifying Person:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Signature of Certifying Person: _____

Position within Company:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Company name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Company address:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Phone:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of

Certification

Place of

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Certification

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

<p>Official Stamp of the SQI / ATC / Manufacturer / Authorised Distributor / Convertor</p>
--

Guidelines for completing Modification / Repair Report Template.

Individuals must first read and fully understand the following important information before completing a modifications report (as per the attached template) in respect of a vehicle presented for NCT testing.

Notes

1. In accordance with the Road Traffic (Construction, Equipment and Use of Vehicles) Regulations, S.I. 190 No. of 1963 (as amended), all vehicles on public roads must conform to the general principles set down in these Regulations in relation to the condition and maintenance of vehicles. All parts and equipment of every vehicle shall be in good and efficient working order. It is each vehicle owner's responsibility to ensure his or her vehicle is in compliance with the law and maintained in a roadworthy condition at all times.
2. Suitably qualified individual (SQI) A "suitably qualified individual" (SQI) must have:
 - A Mechanical Engineering/Technical Qualification (Level 7 or higher accredited courses) or appropriate accreditation with Engineers Ireland or the Institute of Automobile Engineer Assessors.
 - A minimum of 5 years' experience of working in a suitable technical environment (preferably automotive or Engineering Environment).
 - Access to adequate facilities to carry out a thorough vehicle examination and appropriate professional indemnity insurance.
3. In addition to this report, a vehicle converted from M₂ or N₁ to M₁ requires a letter on official headed paper from the manufacturer or authorised distributor confirming that the vehicle maybe classed as M₁ in the converted condition.