



Race Car Certification Form (RCCF) (revised 2/2016)

Instructions: Please fill out completely and submit current photos of car, front suspension, engine compartment.

Owner of Record/Driver _____

Telephone _____

Address _____ City _____ State _____ Zip _____

Year of Mfg. _____ Make/Model _____ Body Style _____

Chassis or Serial # _____ Roll bar stamp # _____

Color (s) _____ Transponder # _____

Special Livery or Sponsorship _____ Preferred Car Number _____

Does the car have a log book? Y / N What Organization? _____ Book # _____

Has this car ever raced with SVRA? Y / N If so, by whom and when _____

This car is: (Circle one) Replica Continuation Car Historic Race Car

Category:

Production Sports Car ___ Sports Racer ___ Formula ___ Sedan ___ FIA/GT ___ FIA Prototype ___ GTP/Group C ___

IMSA/FIA GT ___ Trans-Am ___ NASCAR ___ Indy/Champ Car ___ Street Car ___ Other _____

Engine: Engine Mfg. _____ Engine Designation _____ Stock Displacement _____

Charging (Circle) Yes No

Transmission Make/Model (Original) _____ (Actual) _____ Fwd. Speeds _____

(Circle) Production / Syncro Racing / Dog Ring

Brakes: Original? Y / N Caliper material (Circle) Aluminum Cast Iron Brand _____

Front Brakes: Disc / Drum Rear Brakes: Disc / Drum Dual Master Cyl: Y / N

List any modifications to the brake system _____

Wheels: Front, Dia. _____ Width _____ Rear, Dia. _____ Width _____ Type _____

Tires: Make _____ Model _____

(Circle) Treaded Slick Grooved Slick (Circle) Bias Radial

Front Tire size _____ Rear Tire Size _____

Chassis: Track Dimension (inside one wheel to outside the other) (F) _____ (R) _____



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Chassis: Stock Chassis with Roll Bar/Cage ____ Semi-Tube Frame ____ Full Tube Frame ____ Monocoque ____

Material of bodywork; Tub ____ Fenders ____ Doors ____ Hood ____ Rear Deck ____

Has this car been re-bodied or re-tubbed (Y | N) If so, when _____

Tow Eye(s) Y / N

Weight: Actual Weight _____

Fuel Cell: (FIA-FT3 Rating): Manufacturer _____ Install Date _____ Last Inspected _____

Suspension: Make, Model and type of Shocks _____

Original Number and Location of Suspension Pickup Points, Front: Y / N Rear: Y / N

Suspension Geometry changed from Original? Y / N If Yes explain _____

Does this car have: Remote Reservoir Shocks Y / N Traction Control Y / N Carbon Fiber Parts Y / N

List any significant modifications from standard (Factory OEM), to chassis, suspension, rear end or bodywork:

Describe aero enhancements, i.e. wings, splitters, air dams, flares, etc:

List any other modifications from "as raced in period" specified by the appropriate SVRA Group:

History: List the most significant racing history of this car:

I have read the SVRA General Rules and Regulations and all Supplemental Regulations that apply to my Make and Model car as well as the Group / Class that it is intended to run in. I hereby certify that the information provided on this form to be correct and car is prepared in a manner consistent with the intentions of the SVRA regulations.

Signed by Car Owner/Entrant

date _____

Please Email to:
rick@svra.com
kathy@svra.com



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