



**BRITISH COLUMBIA**

Ministry of Transportation and Infrastructure  
Commercial Vehicle Inspection Report

**FINAL INSPECTION CONFIRMATION NUMBER**  
**15612074**

**DECAL NUMBER**  
**FO33576**

**DECAL EXPIRY DATE**  
**31 AUG 2022**

INSPECTION RESULT: **Pass**  
INSPECTION TYPE: **Complete**  
REASON FOR INSPECTION: **Annual**  
COLLISION REPAIR FACILITY:

WORK ORDER # **001825**      INSPECTION START DATE **20 AUG 2021 17:00**      INSPECTION COMPLETE DATE **21 AUG 2021 00:30**

REASON NOTE:  
TECHNICIAN NAME:      PHONE #:

INSPECTOR'S NUMBER: **203200**  
INSPECTOR'S NAME: **SINGH, TAJINDER**  
LICENCE EXPIRY DATE: **31-MAR-2023**  
FACILITY NUMBER: **S11850**  
FACILITY NAME: **METRO TRUCK AND TRAILER REPAIR**  
INSPECTION CLASS: **3 - Trailer and semi-trailer**

OWNER/LESSEE: **WELLS FARGO EQUIPMENT FINANCIA HAP TRUCKING L'**  
ADDRESS: **7954 WEBSTER RD**  
CITY: **Delta**      PROV: **BC**      POSTAL CODE: **V4G1G6**  
REGISTRATION #: **12290360**      VEH. JURISDICTION: **BC**      PLATE: **56812U**  
YEAR: **2017**      MAKE: **GREAT DANE**      MODEL:  
BODY STYLE: **VAN**      VIN: **1GRAA0629HD469043**  
ODOMETER: **KM**      FUEL TYPE:  
UNIT/FLEET #: **53213**      BRAKE TYPE: **Air**

"F" Failed "R" Repaired Same Day "P" Passed "PC" Passed With Caution "O" Out Of Service "NA" Not Applicable

|   | F | R                                   | P                                   | PC | O | NA                                  |  | F | R | P | PC | O | NA                                  |
|---|---|-------------------------------------|-------------------------------------|----|---|-------------------------------------|--|---|---|---|----|---|-------------------------------------|
| <b>Section 1 - Power Train</b>                      |   |                                     |                                     |    |   | <input checked="" type="checkbox"/> | Pressure Fuel  |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Liquid Propane Gas   |   |   |   |    |   | <input checked="" type="checkbox"/> |
|   |   |                                     |                                     |    |   |                                     | Compressed Natural Gas   |   |   |   |    |   | <input checked="" type="checkbox"/> |
| <b>Section 2 - Suspension</b>                       |   |                                     | <input checked="" type="checkbox"/> |    |   |                                     | <b>Pressure Fuel Inspector's Name &amp; Number</b>                       |   |   |   |    |   |                                     |
| <b>Section 3 - Hydraulic Brakes</b>                 |   |                                     |                                     |    |   | <input checked="" type="checkbox"/> | <b>Air Brake Chamber Type, Size and Push Rod Stroke Measurement (mm)</b> |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Axle # 1 2 3 4 5 6 7 8 9   |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Type: Clamp Clamp  |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Size: 30 30  |   |   |   |    |   |                                     |
| <b>Section 3A - Air Brakes</b>                      |   |                                     | <input checked="" type="checkbox"/> |    |   |                                     | Slack: Auto Auto   |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Left: 32 35  |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Right: 32 34   |   |   |   |    |   |                                     |
| <b>Section 4 - Steering</b>                         |   |                                     |                                     |    |   | <input checked="" type="checkbox"/> | Comments:  |   |   |   |    |   |                                     |
| <b>Section 5 - Instruments, Auxiliary Equipment</b> |   |                                     |                                     |    |   | <input checked="" type="checkbox"/> | <b>Air Brake Camshaft Rotation Measurement (degrees)</b>                 |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Axle # 1 2 3 4 5 6 7 8 9   |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Left: 35 0   |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Right: 40 0  |   |   |   |    |   |                                     |
| <b>Section 6 - Lamps</b>                            |   | <input checked="" type="checkbox"/> |                                     |    |   |                                     | Comments: 2 - REPLACED BOTH SIDE BRAKE SHOES AND DRUMS                   |   |   |   |    |   |                                     |
| <b>Section 7 - Electrical System</b>                |   | <input checked="" type="checkbox"/> |                                     |    |   |                                     | <b>Brake Lining/Pad Measurement (mm)</b>                                 |   |   |   |    |   |                                     |
| <b>Section 8 - Body &amp; Frame</b>                 |   | <input checked="" type="checkbox"/> |                                     |    |   |                                     | Axle # 1 2 3 4 5 6 7 8 9   |   |   |   |    |   |                                     |
| <b>Section 9 - Tires &amp; Wheels</b>               |   | <input checked="" type="checkbox"/> |                                     |    |   |                                     | Type: Lining (S Lining (S  |   |   |   |    |   |                                     |
| <b>Section 10 - Couplers &amp; Hitches</b>          |   | <input checked="" type="checkbox"/> |                                     |    |   |                                     | Left: 19 21  |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Right: 19 21   |   |   |   |    |   |                                     |
| <b>Section 11 - Other Vehicle Components</b>        |   |                                     |                                     |    |   | <input checked="" type="checkbox"/> | Comments: 2 - BOTH SIDE NEW BRAKES                                       |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | <b>Rotor/Drum Measurement (mm)</b>                                       |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Axle # 1 2 3 4 5 6 7 8 9   |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Type: Drum Drum  |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Left: 0 419.1  |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Right: 0 419.1   |   |   |   |    |   |                                     |
|   |   |                                     |                                     |    |   |                                     | Comments: 1 - DUST SHIELDS REMOVED; 2 - BOTH NEW DRUMS                   |   |   |   |    |   |                                     |

General Inspection Comments:

Inspector's Name **SINGH, TAJINDER**

Signature

The Inspector's signature above is certification that this vehicle has been inspected to the requirements of the Motor Vehicle Act and Regulations.

**NOTICE: KEEP THIS VEHICLE INSPECTION REPORT WITH VEHICLE REGISTRATION**

The personal information collected on this form is collected under the authority of section 216 of the Motor Vehicle Act and Division 25 of the Motor Vehicle Act Regulations. It is collected for the purpose of processing this vehicle inspection and for generally administering the Vehicle Inspection Program and the National Safety Code (e.g. regulating carriers, authorized inspectors, and designated inspection facilities). If you have any questions about the collection of this information, you may contact the Sr. Manager, NSC/VIP at the Commercial Vehicle Safety Enforcement Branch, by writing to P.O. Box 9250, Stn Prov. Gov't, Victoria, BC V8W 9J2, by e-mailing to vehicle.inspections@gov.bc.ca or calling 250-952-0577.

PLACE STAPLE HERE



Insurance Corporation of British Columbia

(the Corporation)

Owner's Certificate of Insurance and Vehicle Licence

Transaction Timestamp 20210111160103

Owner's BC Driver's Licence Number

Owner

WELLS FARGO EQUIPMENT FINAN (LESSOR) HAP TRUCKING LTD. (LESSEE) 7954 WEBSTER RD DELTA BC V4G 1G6

Certificate Number 55.C2C Effective Date 01Feb2021 Expiry Date 31Jan2022 Registration Number 12290360 Licence Plate Number 56812U Decal Number 00333570 VIN 1GRAA0629HD469043 Fleet Number 726331 Unit Number 53213 Vehicle Inspection Decal FL38044 Vehicle Inspection Expiry 31Aug2021 NSC Number NOT\*REQD Transaction Type RENEW Agency Number 63781 Document Number 2914J8PK



Proof of Insurance

The owner and/or the operator of the vehicle described herein is insured against liability for bodily injury and property damage by reason of the operation of such vehicle. The coverage provided by this certificate also satisfies the minimum limits set out by the respective legislation governing vehicle insurance in any area of Canada and the USA.

This document is to be signed and carried in the insured vehicle as proof of insurance.

Vehicle Use BUSINESS OR COMMERCIAL USE.

Declaration of principal driver not permitted. Principal Driver

Conditional Factor

By signing here, you:

- apply for a Vehicle Licence and Registration under the Motor Vehicle Act or Commercial Transport Act;
• apply for an Owner's Certificate of Insurance under the Insurance (Vehicle) Act and Regulation (the Regulation);
• apply for optional insurance for which a premium is shown, in accordance with the terms and conditions of the ICBC Autoplan Optional Policy (the Optional Policy);
• if optional insurance is purchased, accept delivery of a copy of the Optional Policy by viewing it at www.icbc.com/optionalpolicy, or acknowledge receipt of a copy of the Optional Policy;
• certify that the driver is correct for all new plate, renewal transactions, and for adding or removing drivers;
• certify that coverage, use, territory and where applicable, location address are correct;
• acknowledge that the description of vehicle use set out is a summary of permitted uses in the indicated rate class and that complete details are available to you from your Autoplan agent or ICBC;
• certify that the vehicle is not currently required to be registered and licensed in another jurisdiction;
• certify that you, if under 18 years of age, have the consent of a parent or (legal) guardian to license and register this vehicle;
• certify that all information on all pages of this form is true and agree that you are responsible for any inaccuracies on any page or pages of this form.

Under section 75 of the Insurance (Vehicle) Act, your claim is invalid if at any time you fail to provide complete and accurate information, violate a term or condition of your policy or commit fraud. This is a summary. For full information, see section 75 of the Insurance (Vehicle) Act.

If the lessee signs this form, the lessee agrees to be jointly and severally liable with the lessor for all premium or premium-related debt.

NOT VALID UNLESS STAMPED BY AUTHORIZED ISSUING OFFICE 63781 JAN 11 2021

Customer Copy Signature(s) Not Required

SIGNATURE OF OWNER

Customer Copy Signature(s) Not Required

SIGNATURE OF OWNER



Insurance Corporation of British Columbia

(the Corporation)

Vehicle Registration

Registered Owner

WELLS FARGO EQUIPMENT FINAN (LESSOR) HAP TRUCKING LTD. (LESSEE) 7954 WEBSTER RD DELTA BC V4G 1G6

Number of Owners 1

This Certificate must be carried in the vehicle. This Certificate must be signed by the owner as seller if the vehicle is sold.

When you sell the vehicle, the buyer must take the Registration and submit it with an application for transfer within 10 days of the purchase. Contact your Autoplan agent for details.

Registration Number 12290360 Licence Plate Number 56812U Year 2017 Make Great danc Model Body Style VanTrailerHeavy VIC ADGPF3 Colour White VIN 1GRAA0629HD469043 Fuel Type Net Weight (kg) GVW (kg)/Disp. (cc) COMTLR Seating Capacity Vehicle Type COMMERCIAL TRAILER Anti-Theft Device Vehicle Status NORMAL Import Code Right-Hand Drive NO ORV NO

SIGNATURE OF OWNER

SIGNATURE OF OWNER



Insurance Corporation  
of British Columbia

(the Corporation)

## Owner's Certificate of Insurance and Vehicle Licence

Transaction Timestamp 20210111160103

**Owner** WELLS FARGO EQUIPMENT FINAN  
(LESSOR)  
HAP TRUCKING LTD.

**Certificate No.** 55.C2C  
**Plate No.** 56812U

**Effective Date** 01Feb2021  
**Expiry Date** 31Jan2022

For complete details about your territory contact your Autoplan agent or ICBC.

### Coverages, Fees and Premiums

| Coverages   |   |                                   | Your Cost                             |
|---|---|-----------------------------------|---------------------------------------|
| <b>Basic</b><br>As per Insurance (Vehicle) Act and Regulation   | <b>Territory Z</b><br><b>Rate Class 513</b> | <b>Fleetplan Discount 58%</b>     | \$119                                 |
| <b>Third Party Liability</b><br>(Regulation, Part 8) (Optional Policy, Division 4)  | <b>Limit \$5,000,000</b>                    |                                   | \$102                                 |
| <b>Collision</b><br>(Optional Policy, Division 5)   | <b>Deductible \$500</b>                     | <b>Declared Value \$30,000.00</b> | \$1,249                               |
| <b>Comprehensive</b><br>(Optional Policy, Division 5)   | <b>Deductible \$300**</b>                   | <b>Declared Value \$30,000.00</b> | \$202                                 |
| <b>Loss of Use</b><br>(Optional Policy, Division 5)   | <b>Daily Limit \$100</b>                    | <b>Total Limit \$2000</b>         | \$50                                  |
| ** Comprehensive coverage with a \$300 deductible includes a \$200 deductible for any claim for windshield damage caused by missiles or flying objects. |   |                                   | <b>Annual Insurance Total</b> \$1,722 |

For trailers - Combined Driver Factors and Fleetplan discounts or surcharges do not apply to Basic and Third Party Liability premiums.

|  |  |  |
|--|--|--|
| <b>Customer Copy</b><br><b>Signature(s) Not Required</b> | <b>Customer Copy</b><br><b>Signature(s) Not Required</b> | <b>Customer Copy</b><br><b>Signature(s) Not Required</b> |
| SIGNATURE OF CUSTOMER                                    | SIGNATURE OF CUSTOMER                                    | SIGNATURE OF AGENT                                       |

**Your annual insurance costs include the following savings:**  
• Fleetplan Discount

**Annual Licence Fee** \$32.00

**Agent Comments**  
COV D/V CONF.

**Total Amount Due** \$1,754.00

**Applicable Tax Situation** GST only paid to seller  
**Seller GST Number** 893623934  
**Exemption Type** Other (CTB approval only)