



**FINAL INSPECTION  
CONFIRMATION NUMBER**  
**15726109**

**DECAL  
NUMBER**  
**FO33653**

**DECAL EXPIRY DATE**  
**31 OCT 2022**

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

WORK ORDER #

INSPECTION START DATE  
**05 OCT 2021 00:00**

INSPECTION COMPLETE DATE  
**05 OCT 2021 00:00**

REASON NOTE: **WRONG PUSH ROD MEASUREMENTS**

TECHNICIAN NAME:

PHONE #:

INSPECTOR'S NUMBER: **201923**  
INSPECTOR'S NAME: **SIDHU, PAWANPREET**  
LICENCE EXPIRY DATE: **30-APR-2022**  
FACILITY NUMBER: **S11850**  
FACILITY NAME: **METRO TRUCK AND  
TRAILER REPAIR**  
INSPECTION CLASS: **3 - Trailer and semi-trailer**

OWNER/  
LESSEE: **HAP TRUCKING LTD.**  
ADDRESS: **7954 WEBSTER RD**  
CITY: **Delta** PROV: **BC** POSTAL CODE: **V4G1G6**  
REGISTRATION #: **13482236** VEH. JURISDICTION: **BC** PLATE: **70440J**  
YEAR: **2021** MAKE: **HYUNDAI** MODEL:  
BODY STYLE: **VAN** VIN: **3H3V532C5MT088006**  
ODOMETER: **KM** FUEL TYPE:  
UNIT/FLEET #: **53257** 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>						
<b>Section 3A - Air Brakes</b>			<input checked="" type="checkbox"/>				Axle # 1 2 3 4 5 6 7 8 9						
<b>Section 4 - Steering</b>						<input checked="" type="checkbox"/>	Type: Clamp Clamp						
<b>Section 5 - Instruments, Auxillary Equipment</b>						<input checked="" type="checkbox"/>	Size: 30 30						
<b>Section 6 - Lamps</b>			<input checked="" type="checkbox"/>				Slack: Auto Auto						
<b>Section 7 - Electrical System</b>			<input checked="" type="checkbox"/>				Left: 32 30						
<b>Section 8 - Body &amp; Frame</b>			<input checked="" type="checkbox"/>				Right: 32 32						
<b>Section 9 - Tires &amp; Wheels</b>			<input checked="" type="checkbox"/>				Comments:						
<b>Section 10 - Couplers &amp; Hitches</b>			<input checked="" type="checkbox"/>				<b>Air Brake Camshaft Rotation Measurement (degrees)</b>						
<b>Section 11 - Other Vehicle Components</b>						<input checked="" type="checkbox"/>	Axle # 1 2 3 4 5 6 7 8 9						
<b>General Inspection Comments:</b>							Left: 60 60						
							Right: 62 61						
							Comments:						
							<b>Brake Lining/Pad Measurement (mm)</b>						
							Axle # 1 2 3 4 5 6 7 8 9						
							Type: Lining (S Lining (S						
							Left: 16 16						
							Right: 16 16						
							Comments:						
							<b>Rotor/Drum Measurement (mm)</b>						
							Axle # 1 2 3 4 5 6 7 8 9						
							Type: Drum Drum						
							Left: 0 0						
							Right: 0 0						
							Comments: 1 - DUST SHIELDS REMOVED; 2 - DUST SHIELDS REMOVED						

Inspector's Name **SIDHU, PAWANPREET**

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.



Insurance Corporation  
of British Columbia  
(the Corporation)

PLACE STAPLE HERE

Owner's Certificate of Insurance and Vehicle Licence

Transaction Timestamp 20210409101515

Owner's BC Driver's Licence Number

Owner  
HSBC BANK CANADA  
(LESSOR)  
HAP TRUCKING LTD.  
(LESSEE)  
7954 WEBSTER RD  
DELTA BC V4G 1G6

Certificate Number 6Z.T61  
Effective Date 09Apr2021  
Expiry Date 31Jan2022  
Registration Number 13482236  
Licence Plate Number 70440J  
Decal Number 00446782  
VIN 3H3V532C5MT088006  
Fleet Number 726331  
Unit Number 53257  
Vehicle Inspection Decal 12174  
Vehicle Inspection Expiry 31Oct2021  
NSC Number NOT\*REQD  
Eff. Date of Current Certificate 01Feb2021  
Transaction Type CHANGE  
  
Agency Number 63781  
Document Number 2MX1FFPH



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 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](http://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

Customer Copy  
Signature(s) Not Required

SIGNATURE OF OWNER

Customer Copy  
Signature(s) Not Required

SIGNATURE OF OWNER

63781

APR 09 2021



Insurance Corporation  
of British Columbia  
(the Corporation)

Registered Owner  
HSBC BANK CANADA  
(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.

SIGNATURE OF OWNER

SIGNATURE OF OWNER

Vehicle Registration

Registration Number 13482236  
Licence Plate Number 70440J  
Year 2021  
Make Hyundai  
Model  
Body Style VanTrailerHeavy  
VIC AHSPFE  
Colour White  
VIN 3H3V532C5MT088006  
Fuel Type  
Net Weight (kg)  
GVW (kg)/Disp. (cc) COMTLR  
Seating Capacity  
Vehicle Type COMMERCIAL TRAILER  
Anti-Theft Device  
Vehicle Status NORMAL  
Import Code CANADIAN IMPORT  
Right-Hand Drive NO  
ORV NO



Insurance Corporation  
of British Columbia

(the Corporation)

**Owner's Certificate of Insurance and Vehicle Licence**

Transaction Timestamp 20210409101515

**Owner** HSBC BANK CANADA  
(LESSOR)  
HAP TRUCKING LTD.

**Certificate No.** 6Z.T6I  
**Plate No.** 70440J

**Effective Date** 09Apr2021  
**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> As per Insurance (Vehicle) Act and Regulation	<b>Territory Z</b> Rate Class 513	<b>Fleetplan Discount</b> 58%	\$119
<b>Third Party Liability</b> (Regulation, Part 6) (Optional Policy, Division 4)	Limit \$5,000,000		\$102
<b>Collision</b> (Optional Policy, Division 5)	Deductible \$1,000	Declared Value \$70,000.00	\$2,123
<b>Comprehensive</b> (Optional Policy, Division 5)	Deductible \$300**	Declared Value \$70,000.00	\$340
<b>Loss of Use</b> (Optional Policy, Division 5)	Daily Limit \$100    Total Limit \$2000		\$50
<b>** Comprehensive coverage with a \$300 deductible includes a \$200 deductible for any claim for windshield damage caused by missiles or flying objects.</b>			
			<b>Annual Insurance Total</b> \$2,734

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

<b>Customer Copy</b> <b>Signature(s) Not Required</b>	<b>Customer Copy</b> <b>Signature(s) Not Required</b>	<b>Customer Copy</b> <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

<b>Prorated Premium</b>	\$2,712.00
<b>Adjustment to Annual Premium</b>	\$117.00

**Agent Comments**  
DECALRED VALUE CHANGED ONLY AS PER INSURED REQUEST

**Total Amount Due** \$95.00

**Applicable Tax Situation** PST paid to seller (registrant)  
**Seller PST Number** 10139004