					Statement of Conf (June 2006)	form	ity						
R	Name:			N/	lodel Year:				Customs Entry #:			_	
RI#:				Make/Model:					Entry Date:				
Address Where Vehicle Was Conformed:			-						Port Code:				
Address where vehicle was comofmed:				VIN:									
			-	Manufacture Date (Mo/Yr):					Service Insurance Policy #:				
Address Where Vehicle Can Be Inspected:			-	Odometer: [ ] miles [ ] km					Insurer:				
- Address where vericie our be inspected.			- -	Vehicle Type: Vehicle Eligibility #:					Is this your initial certification for the model, and model year? [ ] Yes				
	Conformity to the FMVSS and other applicable requirements has been accomplished by one of the following:  O - Conformed at time of original manufacture M - Modified to conform after original manufacture N - Not applicable												
No.	FMVSS	at time of			FMVSS				FMVSS	0	М	N	
		O W	IN				IVI IN	_			IVI	IN	
101	Controls and Displays		Ш		New Pneumatic Tires			_	School Bus Rollover Protection	-		<u> </u>	
102	Transmission Shift Lever, Seq-		Ш		School Bus Pedestrian Safety			_	School Bus Joint Strength				
103	Windshield Defrosting, Defogging		Ш		Passenger Car Brake Systems			_	School Bus Seating/Crash Protection			<u> </u>	
104	Windshield Wiping and Washing		Ш	139	New Pneumatic Radial Tires			_	Rear Impact Guards	-		<u> </u>	
105	Hydraulic and Electric Brake Sys-		Ш		Occupant Protection In Interior	$\vdash$		_	Rear Impact Protection			<u> </u>	
106	Brake Hoses		Ш		Head Restraints				Child Restraint Anchorage Systems			<b> </b>	
108	Lamps, Reflective Devices, and		Ш	203	Impact Protection From Steering	<u> </u>		_	Fuel System Integrity			<u> </u>	
109	New Pneumatic Tires		Н		Steering Control Rearward Dis-			_	Flammability of Interior Materials			<b>—</b>	
110	Tire Selection and Rims		Ш		Glazing Materials	$\vdash$	_	-	Fuel System Integrity of CNG Vehicles			<b> </b>	
111	Rearview Mirrors		Н		Door Locks and Retention Comp-	$\vdash$		304	CNG Fuel Container Integrity			<del></del>	
113	Hood Latch System  Theft Protection		Н		Seating Systems	$\vdash$		_	Electric-Powered Vehicles Interior Trunk Release				
114	Theft Protection		Н		Occupant Crash Protection	$\vdash$		401				<del></del>	
116	Motor Vehicle Brake Fluids		Н		Seat Belt Assemblies Seat Belt Assembly Anchorages	$\vdash$	_		Platform Lift Installations Low Speed Vehicles			<b> </b>	
118 119	Power Operated Window Systems  New Pneumatic Tires	$\vdash$	Н		Windshield Mounting			300	49 CFR				
120	Tire Selection and Rims		Н		Child Restraint Systems	$\vdash$		565	VIN Requirements				
	Air Brake Systems		Н		Side Impact Protection	$\vdash$		_	Certification	-			
121	,		Н		Roof Crush Resistance	$\vdash$	-	_					
<ul><li>122</li><li>123</li></ul>	Motorcycle Brake Systems  Motorcycle Controls and Displays		Н		Bus Exits, Window Retention, Rele	$\vdash$		301	Bumper Standard				
	, ,		Н			$\vdash$		-		-			
124 Accelerator Control Systems 219 Windshield Zone Intrusion  I state and provide substantiation that: (check only one):  [ ] The vehicle is not subject to any safety recalls as of the time of such certification, or													
	] All noncompliances and defec	-	-					d					
Ιc	ertify that: (check only one):												
[	] The vehicle is not required to	comply	with	the p	parts marking requirements of	the TI	neft P	revent	ion Standard (Part 541), <b>or</b>				
[	] The vehicle, as manufactured	or as n	nodifi	ed p	rior to importation, complies w	ith tho	se pa	rts ma	rking requirements.				
	ertify that: (check only one):												
[	[ ] I know that the vehicle that I am certifying conforms with all applicable Federal motor vehicle safety and bumper standards because I												
	. ,				med on the vehicle to effect co								
	[ ] I know that the vehicle I am certifying conforms with all applicable Federal motor vehicle safety and bumper standards because the person who performed the necessary modifications to the vehicle is an employee of the above named RI and has provided full documentation of the work that I have reviewed, and I am satisfied that the vehicle as modified complies.												
RI or Designated Representative Signature*: Printed Name:													
Designation:(* Must be original, not machine stamp, etc.)  Date:										_			