



HYUNDAI
Translead

FMCSA ANNUAL INSPECTION FORM

HYUNDAI TRANSLEAD

Plant: Blvd. Hyundai No. 41, Col. Ampliación Constitución,
Playas de Rosarito, Baja California, MX. CP 22707
Corporate Office: 8880 Rio San Diego Drive, Ste # 600
San Diego, CA 92108

Inspection Facility: HT Rosarito Plant	Unit Number: <u>DTL2244731</u>	Hubodometer (if applicable):
City and State: Rosarito, Baja California, MX.	Customer: <u>PREMIER LEASING</u>	S.A.P. Number: <u>30020917</u>
Inspector Name: <u>ALAN ESTRADA</u>	VIN Number: <u>3H3VS32K1RS119286</u>	License Plate Number: <u>4SD394J</u>
Inspection Date: <u>09/05/23</u> <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	Repair Date: <u>N/A</u>	Year / Model: <u>2024/VC2530152-A11</u>

OK	NEEDS REPAIR	ITEMS INSPECTED	OK	NEEDS REPAIR	ITEMS INSPECTED
		BRAKE SYSTEM			SAFE LOADING
<input checked="" type="checkbox"/>		Service Brakes	<input checked="" type="checkbox"/>		Part(s) of vehicle or condition of loading such as spare tire or any part of the load or dunnage can fall onto the roadway
<input checked="" type="checkbox"/>		Parking Brake System	<input checked="" type="checkbox"/>		Protection against shifting cargo
<input checked="" type="checkbox"/>		Brake Drums or Rotors	<input checked="" type="checkbox"/>		STEERING MECHANISM
<input checked="" type="checkbox"/>		Brake Hose	<input checked="" type="checkbox"/>		For units with Steerable Rear Axle.
<input checked="" type="checkbox"/>		Brake Tubing	<input checked="" type="checkbox"/>		SUSPENSION
<input checked="" type="checkbox"/>		Audible Air Leaks	<input checked="" type="checkbox"/>		Any U Bolt(s), spring hanger(s) or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from it's normal position
		COUPLING DEVICES			Spring assembly
<input checked="" type="checkbox"/>		Fifth Wheels / Upper Coupler	<input checked="" type="checkbox"/>		Torque, radius or tracking component
<input checked="" type="checkbox"/>		Pintle Hooks	<input checked="" type="checkbox"/>		FRAME
<input checked="" type="checkbox"/>		Drawbar / Towbar Eye	<input checked="" type="checkbox"/>		Frame members
<input checked="" type="checkbox"/>		Drawbar / Towbar Tongue	<input checked="" type="checkbox"/>		Tire and Wheel Clearance
<input checked="" type="checkbox"/>		Safety Devices	<input checked="" type="checkbox"/>		Adjustable Axle Assemblies (Sliding Sub-Frames).
<input checked="" type="checkbox"/>		Saddle-Mounts	<input checked="" type="checkbox"/>		TIRES
		EXHAUST SYSTEM / REFRIGERATED UNITS			WHEELS AND RIMS
<input checked="" type="checkbox"/>		No part of the exhaust system of any motor vehicle shall be located as would be likely to result in burning, charring or damaging the electrical wiring, the fuel supply, or any combustible part of the motor vehicle	<input checked="" type="checkbox"/>		Lock or Side Ring
<input checked="" type="checkbox"/>		FUEL SYSTEM / REFRIGERATED UNITS	<input checked="" type="checkbox"/>		Wheels and Rims
<input checked="" type="checkbox"/>		Visible leak	<input checked="" type="checkbox"/>		Fasteners
<input checked="" type="checkbox"/>		Fuel tank filler cap missing	<input checked="" type="checkbox"/>		Welds
<input checked="" type="checkbox"/>		Fuel tank securely attached	<input checked="" type="checkbox"/>		UNIT NUMBERS DISPLAYED
		LIGHTING DEVICES			SPLASH GUARDS
<input checked="" type="checkbox"/>		All lighting devices and reflectors required by Section 393 shall be operable.	<input checked="" type="checkbox"/>		Driver Side
			<input checked="" type="checkbox"/>		Passenger Side

I have inspected the vehicle described above and certify that all entries are true and correct. I certify that this inspection meets the requirements of 49 CFR Part 396.17 and is in accordance with Appendix G to Subchapter B, Minimum Periodic Inspection Standards, and the vehicle has passed / failed as indicated above.

INSPECTOR'S NAME (Please Print). ALAN ESTRADA

INSPECTOR'S SIGNATURE: ALAN ESTRADA