



CRA Technical Inspection Checklist

Printed Name: _____

Race Number: _____

Signature: _____

		Racer Check	Technical Inspection Check
GOLD CUP RACE	<input type="checkbox"/>		
	Sponsor Stickers	<input type="checkbox"/>	<input type="checkbox"/>
BRAKES			
	Functional Front and Rear Brakes	<input type="checkbox"/>	<input type="checkbox"/>
	RTV Silicone on Banjo Bolts or safety wire	<input type="checkbox"/>	<input type="checkbox"/>
BODYWORK			
	Fluid Retention Belly Pan (Bring to Tech)	<input type="checkbox"/>	<input type="checkbox"/>
FLUIDS FILTERS & GUARDS			
	OEM Oil Filter	<input type="checkbox"/>	<input type="checkbox"/>
	Distilled Water, Redline Water Wetter, Motul Race Coolant, Maxima Cool-Aide	<input type="checkbox"/>	<input type="checkbox"/>
	Radiator Guard	<input type="checkbox"/>	<input type="checkbox"/>
	Oil Cooler Guard (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>
	Engine Case Covers (unless not currently available)	<input type="checkbox"/>	<input type="checkbox"/>
	Toe Guard	<input type="checkbox"/>	<input type="checkbox"/>
SAFETY WIRE			
	Oil Drain Bolt	<input type="checkbox"/>	<input type="checkbox"/>
	Oil Filter	<input type="checkbox"/>	<input type="checkbox"/>
	Oil Filler Cap	<input type="checkbox"/>	<input type="checkbox"/>
	Oil Cooler Bolt (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>
	Radiator Cap	<input type="checkbox"/>	<input type="checkbox"/>
	Water Pump Drain Plug	<input type="checkbox"/>	<input type="checkbox"/>
	Axles and/or Axle Nuts (Not Applicable if Axle sliders are used)	<input type="checkbox"/>	<input type="checkbox"/>
	Fork Pinch Bolts	<input type="checkbox"/>	<input type="checkbox"/>
	Front and Rear Caliper Bolts	<input type="checkbox"/>	<input type="checkbox"/>
	Video Camera	<input type="checkbox"/>	<input type="checkbox"/>
	Any bolt or hose that carries or returns oil	<input type="checkbox"/>	<input type="checkbox"/>
RACE NUMBERS			
	Front	<input type="checkbox"/>	<input type="checkbox"/>
	Tail or Side or Lower	<input type="checkbox"/>	<input type="checkbox"/>
	Black Numbers on White Background (Expert)	<input type="checkbox"/>	<input type="checkbox"/>
	Black Numbers on Yellow Background (Amateurs)	<input type="checkbox"/>	<input type="checkbox"/>
	Numbers 6" Tall, Background 1" Past Numbers	<input type="checkbox"/>	<input type="checkbox"/>
GEAR			
	Helmet Manufacturer date < 5 years from today's date?	<input type="checkbox"/>	<input type="checkbox"/>