Recall information details can be found by visiting the National Highway Traffic Safety Administration's website at www.nhtsa.gov or calling the Vehicle Safety Hotline at 1-888-327-4236.

PLEASE RETAIN FOR YOUR RECORDS

Federal Motor Carrier Safety Regulation Compliance

I have performed the annual inspection of the referenced vehicle, which is accurate, complete and in accordance with the inspection criteria set forth in 49C.F.R. Chapter 396.17 through 396.21

Overall Result: Pass		Fees	
Test Date/Time:	09/17/2025 03:40 PM	Inspection Fee: Repair Cost:	\$0.00 \$0.00
Inspection Class: Inspection Exp Date:	CDEC 9/30/2026	Total:	\$0.00

Vehicle Information		Station Information	
VIN:	13N548200X1584602	Station #:	2F060047
License Number:	TX 174B256	Station Name:	HMR, INC
Registration County: Vehicle Type:	WHARTON Trailer	Station Address:	5477 N SH 71 EL CAMPO, TX 77437
Year:	1999	Inspector Name:	AARON CHOVANETZ
Make: Model:	FONTAINE TRAILER	Inspectio	n Information
Fuel Type: Odometer Reading:	None (e.g. trailer)	Inspection Type:	COMMERCIAL/DECAL
Insurance Exp: Insurance Mileage Exp:	09/05/2026	Test Type:	INITIAL

I CERTIFY THAT I HAVE PROPERLY PERFORMED THE VEHICLE INSPECTION ACCORDING TO THE STATE REGULATIONS AND PROCEDURE MANUALS, AND AS THE UNDERSIGNED DULY APPOINTED INSPECTOR, HEREBY CERTIFY THAT I HAVE PHYSICALLY EXAMINED THE MANUFACTURER'S VEHICLE IDENTIFICATION NUMBER OF THE MOTOR VEHICLE DESCRIBED ABOVE.

Certiffed Inspector Signature

Date