

MOTORCYCLING AUSTRALIA NORTHERN TERRITORY INC PO BOX 40759 CASUARINA NT 0810



MOB 0401 119 118 E-MAIL mant@bigpond.com Website www.mant.org.au

SOUND EMISSION OFFICIAL NOTIFICATION FORM RULE BREACH

Meeting/Activity				
Venue		D	Date	
Details of Entrant/Ri				
Name		Licence N°:		
Class		Licen	Licence Nº:	
Details of Breach and	Recommended Action:			
The machine detailed a Motorcycle Sport	above has exceeded the maximum s	ound test level allowed in	the current Manual of	
Time	dB(A) Reading	Time	dB(A) Reading	
Details of SCO:				
Name		Lice	nce Nº:	
Sound Meter N ^o		Signature:		
Actions taken by Cle	rk of Course/Steward:			
Details of Clerk of Co	ourse Steward:			
Name	me		Licence N°:	
Position ·	osition · Signature·			