

HMC of MSA

Saloon Car

Issuing body:

Category:

Date:

MOTORSPORT SOUTH AFRICA

Association incorporated under section 21 Reg. No. 1995/05605/08

GT Car

Form Number:

Single Seater

HISTORIC MOTORSPORT COMMISSION HISTORIC TECHNICAL PASSPORT

Sports Car

Historic Period:	Pre	66/68	Pre-72	Pre-74	Pre-80	Pre-84	Pre-90		
THIS HTP MUST									
REGISTERED WITH MUST BE KEPT W									
PROPOSED CHAN									
HMC FOR APPROV									
This Technical P	assno	ort is not a	a certificate	of authen	ticity, nor de	oes it in ar	ny way verify	the history	of the car
or its constituen									
appeared to be e									
Make represente	d:				Model:			Year:	
Chassis / VIN Nu	mhor				Car Numb	Ori			
Cliassis / Vilv ivu	mber				Car Nullin	er.			
		COLOU	R PHOTOG	RAPH OF 1	THE CAR IN	ITS PRES	ENT FORM		
			INCED	F DICITAL F					
			INSER	I DIGITAL F	PHOTOGRA	PR REKE			
				9 cm	x 13 cm				
			3/4 f	ront view o	f the compl	ete car			
				1/2 from	nt, 1/2 side				
				1,2 1101	11, 172 0100				
The hard copy	of thi	s form mu	ist bear the	stamp of t	he Motorsp	ort South A	Africa at the	bottom of e	ach page

and over one corner of each photograph

Name & status of signatory:

Approved by the Historic Motorsport Commission of Motorsport South Africa to compete in the 2020 racing season

Signature:

COLOUR PHOTOGRAPH OF THE CAR IN ITS PRESENT FORM INSERT DIGITAL PHOTOGRAPH HERE

9 cm x 13 cm

3/4 rear view of the complete car

1/2 rear, 1/2 side

1 - CHASSIS, SUSPENSION

1.1 CHASSIS FRAME

1.1	OTIAGOIO I RAINE
(a)	Is the car fitted with the original chassis/bodyshell or with a chassis/bodyshell
	conforming to the original dimentions? Yes No
(b)	If no, specify the changes in relation to the original dimentions:
(c)	Construction and materials: (girder, tubular, monocoque, semi monocoque, monobody)
(d)	Note position of all identification numbers on the chassis frame or bodyshell:

1.2 FRONT SUSPENSION

(a)	Is the suspension as per the original type and dimensions?	Yes	No
(b)	If no, specify the changes in relation to the original:		
(c)	Type of suspension (rigid axle, wishbones, McPhearson Strut)		
(d)	Type of spring (coil, leaf, torsion bar)		
(e)	Type of dampers (friction, lever, telescopic)		

1.3 REAR SUSPENSION

(a)	Is the suspension as per the original type and dimensions?	Yes	No
(b)	If no, specify the changes in relation to the original:		
(c)	Type of suspension (rigid axle, IRS, De Dion)		
(d)	Type of spring (coil, leaf, torsion bar)		
(e)	Type of dampers (friction, lever, telescopic)		

2.1 ENGINE

(a)	Is the engine the original make and ty	pe fitted to the chassis/bodyshell?	Yes	No
(b)	If no, specify the changes in relation to	to the original:		
(c)	Is the engine mounted in the original	position:	Yes	No
(d)	If no, specify the changes:			
(e)	Is the cylinder block original or cast u	sing the original material & dimensions?	Yes	No
(f)	If no, specify the changes in relation to	to the original:		
(g)	Is the cylinder head original or cast us	sing the original material & dimensions?	Yes	No
(h)	If no, specify the changes in relation to	to the original:		
(i)	Engine Make:	Type:		
(j)	Number of Cylinders	Configuration (straight, V, flat)		
(k)	Original capacity: Original bore mm: Original stroke mm:	Current capacity: Current bore mm: Current stroke mm:		
(I)	Camshaft position:(Block/OHC)	Number of valves p	per cylinder:	

2.2 IGNITION

(a)	Is the system as per the original specification?	Yes	No
(b)	If no, specify the changes in relation to the original specification:		
(c)	If the ignition is electronic, specify the system:		

2.3 FUEL FEED

(a)	Are the make, type and number of carb	ourettors as per the original?	Yes No
(b)	If no, specify the changes in relation to	the original:	
(c)	Carburettor Make:	Туре:	Number:
(d)	Injection: Make	Туре:	
(e)	Is the supercharger as per the original	make & type?	
(f)	If no, specify the changes in relation to	the original:	
(g)	Supercharger: Make	Туре:	

2.4 **LUBRICATION**

(a)	Is the system as per the original type?	Yes	No
(b)	If no, specify the changes in relation to the original:		
(c)	Type (wet sump, dry sump)		

2.5 <u>F</u> U	IEL SYSTEM			
(a)	Is the fuel system as per the original spe	cifications?	Yes	No
(b)	If no, specify the changes in relation to the	ne original specifications:		
(c)	Type of fuel feed (gravity, mechanical pu	mp, electric pump, etc):		
(d)	Is the fuel tank as per the original locatio	n:	Yes	No
(e)	If no, specify the changes in relation to the	ne original:		
		TRANSMISSION		
	ARBOX			- In.
(a)	Is the gearbox as per the original make 8	k type?	Yes	No
(b)	If no, specify the changes in relation to the	ne original:		
(c)	Make:	Туре:		
(d)	Number of forward gears:	Year of manufacture:		
		KES AND STEERING		
	RAKES			I.
(a)	Is the braking system as per the original	specifications?	Yes	No
(b)	If no, specify the changes in relation to the	ne original specification:		
(c)	Type: Front:	Rear:		
(d)	Make: Front:	Rear:		
	EERING			T
(a)	Is the steering as per the original type:		Yes	No
(b)	If no, specify the changes in relation to the	ne original:		
(c)	Type (rack and pinion, steering box)			
5.1 WI		IEELS AND TYRES		
(a)	Are the wheels as per the original specifi	cations (dia & width)	Yes	No
(b)	If no, specify the changes in relation to the	ne original specification:		
,	Diameter Front:	Diameter Rear:		
	Width Front:	Width Rear:		
(c)	Type (wire, pressed steel, light alloy)			
5.2 TY				
(a)	Make:			
(b)	Туре:			
(c)	Size Front:	Size Rear:		

3.1 BC	DDY							
a)	Is the body the original	al or a body/b	odyshell	conforming to	the origina	al dimentions?	Yes	No
b)	If no, specify the char	iges to the o	riginal dia	amentions:				
(c)	Is all the material of th	ne body as p	er the ori	ginal specificati	ons?		Yes	No
(d)	If no, specify the char	ges in relation	on to the	original specific	cation:			
(e)	Type: Saloon Ca	ar	Sports	Car	GT Car		Single	Seater
(f)	Number of seats:	one	two	three	four	other, spec	cify the nu	umber:
(g)	Number of doors:	one	two	four	other, sp	ecify the num	ber:	
6.2 AE	RODYNAMIC DEVICES (cars built af	ter 1966	only)				
(a)	Are these devices as	per the origir	nal specif	fications?			Yes	No
(b)	If no, specify the char	ges in relation	on to the	original specific	cation:			
(c)	Front device:	Minimum I	neight fro	m the ground:		mm		
(d)	Rear device:	Minimum I	neight fro	m the ground:		mm		
6.3 <u>LIC</u>	GHTING							
(a)	Is the lighting as per t	he original s _l	pecification	ons?			Yes	No
(b)	If no, specify the char	ges in relation	on to the	original specific	cation:			
(c)	Generator:	dynamo		alternator				
74 5"	MENCIONO		7 - D	IMENSIONS				
7.1 <u>DII</u> (a)	MENSIONS Wheelbase Original: Wheelbase Current:		mm mm					
(b)	Track: (measured bet	ween the cer		ne tyre treads):				
	Original front:		mm	,	Original	rear:	mm	

Current front: mm Current rear: mm

Original weight according to the manufacturer's kerb weight or homologated minimum or formula weight: kg.

(c)

(d)

Current weight:

kg.

COMPETITOR'S DECLARATION

I CERTIFY THAT THE ANSWERS GIVEN ARE CORRECT, AND I UNDERTAKE TO NOTIFY THE HMC SHOULD CHANGES BE MADE. I ALSO CERTIFY THAT ANY ENTRY FROM FOR AN MSA EVENT WILL BE FILLED IN ACCORDING THE INFORMATION GIVEN ON THE PRESENT FORM.

Name of the competitor:	
Full address:	
MSA Licence number (compulsory):	
Date:	Signature:

CAUTION: This document is intended solely to verify that, at the date of the inspection, the car appears to be eligible to compete in MSA events for Historic Vehicles. It makes no representation as to guarantee the authenticity or the car. For example, a part which appears to be manufactured to original specification was not necessarily fitted car at the time of original manufacture, and the car may have been modified since the date of the inspection. The HMC has not inspected the car for any purpose other than that specified above, and accepts no liability for the accuracy otherwise of any information contained in this form. Such information has been supplied by the owner of the remains solely responsible for its accuracy.

9 - ELIGIBILITY CHECKS

THIS TABLE, TO BE FILLED IN ONLY BY HMC OFFICIALS AND ONLY WHEN NECESSARY, SERVES TO RECORD COMMENTS MADE ON EVALUATION AND IN SUBSEQUENT INSPECTION AT MSA EVENTS.

atus of the off	Name and sta	SVO - Comments	<u>Venue</u>	<u>Date</u>
				-