

# Licensed Vehicle Tester Corrective Action Response Sheet

Please email completed form to: [roadworthy@transport.vic.gov.au](mailto:roadworthy@transport.vic.gov.au)

## Tester details

License number	Date of audit	D	D	M	M	Y	Y	Y	Y
License name									
Trading name									

## Non conformances

The following matters that were identified have been attended to:

No.	Issue	Action taken

## Declaration

I, being the holder/representative of the license indicated above hereby declare that I have taken the above listed action(s) to resolve the non-conformance(s) identified. Where necessary I have attached invoices or photographs as proof of my compliance.

Name	Signature of licence holder/representative
Date signed	

## Attached documents

Please find attached/included
