

FOR	JMMC	USE	ONLY
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Received: Expenses: Payments Licenses

JMMC STEWARD'S REPORT FORM

Orga	nising Club	Date				
Туре	of Event	Status				
Venu	e	Permit No. (s)	Permit No. (s)			
Tracl	k License No	JMMC Steward				
colui boxe	first part of this form is in the format of a check sham. Please refer to notes accompanying each sections. If you feel any part of your report requires special ED and indicate the section here	on if you place a tick al attention by the JMM	in any MC CS	of the shaded C please write		
1. Or	ganization	YES	NO			
(a)	Did the event comply with JMMC Regulations?					
(b)	Were the Senior Officials competent?					
(c)	Was the Permit available for inspection?					
(d)	Did the Clerk of the Course keep the Stewards properly info	ormed?				
(e)	Did the quality of the Organization and /or entry reflect the	status of the event? \Box				
(f)	Did Admission Tickets and official badges (armbands) bear	the disclaimer?				
(g)	How were the Provisional Results announced?			•		
(h)	What time were the Provisional Results announced?					
(i)	What time did the Meeting end?					
Pleas boxes	e elaborate in Section 6 (Comments) on any of the above where	your tick has been placed	in one oj	f the shaded		
2. Ac	cident & Injury	YES	NO			
(a)	Were there any injuries to a third party?					
(b)	Were there any incidents involving damage to third party pr	operty?				
(c)	Were any Officials injured?					
(d)	Were any competitors treated?					
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If you have ticked any of the shaded boxes, please ensure you include a fully completed INCIDENT report form.

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3. Judic	ial	YES	NO
(a)	Were there any Judicial matters?		
	nswer is YES to the above question please ensure all the relevant documentation y Form) is included with your report.	n (includi	ing the Judicial
4. Scrut	ineering	YES	NO
(a)	Were scrutineering facilities satisfactory?		
(b)	Were all Drivers' helmets and clothing in order? (Where applicable)		
(c)	Were the Scrutineers satisfied with the safety of all vehicles?		
(d)	Were the Scrutineers satisfied with the eligibility of all vehicles?		
(e)	Was Noise Testing carried out?		
	nsure all relevant Scrutineers' paperwork is included and /or elaborate in Sectusestions where your tick has been placed in one of the shaded boxes.	ion 6 (Coi	nments) on any of the
	se and Public Safety e/Speed Kart)	YES	NO
(a)	Was the Track License available for inspection?		
(b)	Were adequate Warning Notices displayed?		
(c)	Was the course satisfactory without alteration?		
(d)	Can the Course be used again without alteration?		
B. (All l	Rallies and all events using Public Highways)	YES	NO
(a)	Was the original route used without alteration or re-route?		
(b)	Type of planned stages: Sealed%		
(c)	Number of stages planned		
(d)	How many stages were run more than once?		
(b)	Did any stages run at THIRTY SECOND INTERVALS?		
(c)	If so, was APPROVAL seen by you, where required?		
(d)	Did any stages have a split ROUTE?		
(e)	Did all stages have RADIO COVERAGE?		



6. Comments

Please elaborate here on any of the above questions where your tick was placed in one of the shaded boxes





JUDICIAL SUMMARY

Organising Club	Date	Type of Event
Status	Venue	Permit No. (s)
As a result of Judicial Action, the following penalti	es were imposed/payments ordered:	To record action taken by the Stewards of the Meeting, please complete details

Record of action taken by the Clerk of Course (to be completed by the JMMC Steward)

Competitor's Name	License No./ DOB	Reason	Regulation No.	Penalty Applied	Penalty Points	Amount \$	Paid – YES/NO
TVaine	DOB		140.				

Please ensure you complete the summary overleaf

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Record of action taken by the Stewards of the Meeting (To record action taken by the Clerk of Course, please complete details overleaf)

Competitor's	License No./	Reason	Regulation	Penalty Applied	Penalty Points	Amount \$	Paid – YES/NO
Name	DOB		No.	, 11			

Non-Production of License Fees should also be recorded above for inclusion in the summary of the total amount sent as stated below.

<u>SUMMARY</u> Total amount enclosed \$				
Please do not send cash. Send your own Cheque for the appropriate amount if necessary.				
Clerk of Course (Block Capitals)				
Steward (Block Capitals)				
Steward's Signature				

NOTES: JUDICIAL DECISION SHEETS MUST BE ATTACHED FOR EVERY PENALTY IMPOSED, WHETHER BY THE CLERK OF COURSE OR BY THE STEWARDS OF THE MEETING. ALL PENALTIES MUST BE RECORDED ON THE COMPETITION LICENSE.

WHERE A JMMC LICENSE IS NOT AVAILABLE FOR ENDORSEMENT (EXCLUSING NON-PRODUCTION OF LICENSE) THE SECRETARY OF THE MEETING MUST ENSURE THAT THE COMPETITOR, SUBSEQUENT TO THE MEETING, SUBMITS THEIR LICENSE TO THE CLERK OF THE COURSE FOR THE PENALTY TO BE RECORDED.

FAILURE TO DO SO MUST BE REPORTED TO THE JMMC.



PERSONNEL & EQUIPMENT RECORD

ORGANISING CLUB	DATE	
TYPE OF EVENT	STATUS	
VENUE	PERMIT NUMBER	
To: The Secretary	y of the Meeting	
Please complete the details (as appropriate to the event) and h	and to the JMMC Steward before the end of	of the event.
The following personnel and equipmen	nt were present (please print names):	License no (Where applicable)
CLERK OF THE COURSE		•••••
CHIEF SCRUTINEER		•••••
NOISE TEST OFFICIAL		•••••
CHIEF TIMEKEEPER		
SECRETARY		
OTHER DOCTORS		
CHIEF OBSERVER		
CHIEF INCIDENT OFFICER		
CLUB STEWARDS		
MARSHALLS (HOW MANY)		
RESCUE VEHICLES (HOW MANY)		
AMBULANCES (HOW MANY)		
RECOVERY VEHICLES (HOW MANY)		
RADIO CONTROLLER		
Give numbers and details of fire extinguishers/certificates, including	date of last check:	
Number and details of Timekeeper's Certificates if automatic equipments of Timekeeper's Certificates are automatic equipments.	ment is being used:	
Serial Numbers of Timing Equipment:		
Weighbridge (Certificate no. and date)		
SECRETARY OF THE MEET'S SIGNATURE	DATI	E:

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6.	COMMENTS	(Additional	comments	can be con	tinued over	leaf)

7. GENERAL OBSERVATIONS (Additional comments can be continued overleaf)

Tick every box where relevant JMMC Steward forms are included (Nil reports are NOT required unless Marked with an * (TICK BOX)

PERSONNEL & EQUIPMENT RECORD (*)	
SIGNING-ON DECLARATION RECORD (*)	
JUDICIAL SUMMARY	
PROTEST APPEAL FORM	
NON-PRODUCTION OF LICENCE DECLARATION	
MEDICAL STATISTICS (*)	
INCIDENT REPORT FORM	
RESCUE VEHICLE/CRES ATTENDANCE RECORD	
DRIVING STANDARDSOBSERVERS ATTENDANCE RECORD	
SHIPPING AND REBUIDLING COST ESTIMATES	
Any relevant SCRUTINEERING PAPERWORK	
A full set of FINAL RESULTS (*)	
CLERK OF COURSE APPRAISAL FORM (*)	

(*) THESE FORMS ARE TO BE RETURNED WITH EVERY REPORT

Name	Telephone #
Address	
Signature	Date