

## HEAVY VEHICLE MODIFICATIONS

**Checklist E2**  
**STEERING ALTERATION**

(Y=Yes, N= No, N/A=Not Applicable)

Answer all questions under relevant sections.

**1.General**

- |          |   |                          |
|----------|---|--------------------------|
| 1.1      | Do all replacement/modified components have a mass rating suitable for the mass rating of the vehicle?  | <input type="checkbox"/> |
| 1.2      | Has all heating and welding been performed by a qualified boilermaker and in strict accordance with the axle manufacturer's welding instructions?   | <input type="checkbox"/> |
| 1.3      | Have all welded components been shown to be free of defects by radiographic testing in accordance with AS 2177- <i>Radiography of Welded Butt Joints in Metal</i> ?   | <input type="checkbox"/> |
| 1.4      | Are all components mounted in such a manner that the mountings can withstand all possible operating loads without damage or excessive deflection?   | <input type="checkbox"/> |
| 1.5      | In the case of a power steering system, has a pressure relief valve been fitted and properly adjusted?  | <input type="checkbox"/> |
| 1.6      | Are all hoses and reservoirs in accordance with the manufacturer's recommendations for size, flow and pressure rating, and clear of exhaust components and regions where they possibly may suffer abrasion? | <input type="checkbox"/> |
| 1.7      | Have all chassis modifications been performed in accordance with the vehicle manufacturer's recommendations or Section H - Chassis Frame of this National Code of Practice?                                 | <input type="checkbox"/> |
| 1.8      | Does the vehicle meet all applicable requirements of Section G - Brakes of this National Code of Practice?  | <input type="checkbox"/> |
| 1.9      | Do all cabin alterations conform to Section K - Cabin of this National Code of Practice?  | <input type="checkbox"/> |
| 1.10     | Does the steering system have the required clearance throughout the operating range and suspension travel?  | <input type="checkbox"/> |
| 1.11     | Is the quality of workmanship to a satisfactory standard?   | <input type="checkbox"/> |
| <br>     |   |                          |
| <b>2</b> | <b>Left to Right Hand Drive Conversion</b>  |                          |
| 2.1      | Has the manufacturer's steering geometry been maintained?   | <input type="checkbox"/> |
| 2.2      | Has the steering system been shown to conform to the vehicle manufacturer's right hand drive design specifications or demonstrated to equal the original system in all levels of safety and performance?    | <input type="checkbox"/> |
| 2.3      | Are all modified or replacement components equal in strength to the original components and free from defects?  | <input type="checkbox"/> |

- 2.4 Are all steering column and pedal mounting brackets original right hand drive components or duplicated from original components?
- 3. Dual Steering**
- 3.1 Has the manufacturer's right hand drive steering geometry been retained?
- 3.2 Have all modified or replacement components been demonstrated to equal the original components in strength and performance and shown to be free of defects?
- 3.3 Have all additional moving components in the cabin (except the steering wheel) been provided with guards to prevent fouling with other components or causing injury to vehicle occupants?
- 3.4 Do all electrical systems function correctly and in accordance with the manufacturer's specifications and the relevant jurisdiction's legislation?
- 3.5 Have additional rear vision mirrors been installed on the right hand side of the vehicle to ensure the driver, when seated in the left hand driving position, has adequate rear vision?
- 3.6 Have suitable signs indicating safety and operating procedures been attached in a prominent position adjacent to the steering controls?
- 3.7 Are throttle, brake and clutch control pedals in conventional positions in both driving positions?
- 3.8 Has a speedometer been installed so that its indication is readily visible to the driver when seated in both driving positions?

**NOTE: If the answer to any relevant question is "NO", the modification is not acceptable.**

Vehicle Chassis No/VIN:

Vehicle Modifier:  Examined by:

Company (if applicable):  Certifying Officer No:

Modification Certificate No:  Modification Plate No:

Signed when printed:  Date: