

**SOUTHERN AFRICAN VETERAN & VINTAGE ASSOCIATION
VETERAAN MOTORVERENIGING VIR SUIDER AFRIKA**



CLERK OF THE COURSE REPORT

This report, **FULLY COMPLETED**, and **with attachments**, must be submitted not later than **21 DAYS** after the event to **SAVVA MOTORSPORT**

NAME OF EVENT:.....

PROMOTER:.....

SAVVA PERMIT No: DATE of EVENT.....

TYPE OF EVENT :.....

POSTAL ADDRESS:.....CODE:

ROUTE DISTANCE (Regularity) :.....kms (Non Regularity).....kms

START DATE / TIME (First Competitor) :.....

FINISH DATE / TIME (Last Competitor) :.....

NUMBER OF CONTROLS OPERATED: (Secret).....(Hidden).....(Open).....

NUMBER OF CONTROLS SCORED: (Secret).....(Hidden).....(Open).....

IF ANY CONTROLS NOT SCORED, GIVE REASONS :.....

NUMBER OF ENTRIES :.....STARTERS.....FINISHERS.....

WERE ANY INCIDENTS OR ACCIDENTS REPORTED ? YES / NO
If "yes", attach full details. A copy of this report and accompanying statement must be sent to the Insurance Portfolio holder.

WERE ANY PROTESTS LODGED ? YES / NO
If "yes", SAVVA Steward's report to be submitted to SAVVA Motorsport with full details.

ANNEXURE I

General remarks : Clerk of the Course :.....
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General remarks : SAVVA Steward:.....
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Signatures: Clerk of the Course..... SAVVA Steward.....
Date..... Date.....

THIS SECTION MUST BE COMPLETED IN FULL BY THE CLERK OF THE COURSE!!!

<u>ATTACHMENTS</u>	<u>ACCOUNTING</u>
Please ensure that the following documents are attached to this report	Deposit paid with Permit Application R_____
* Full results with position, name of driver/rider, club, competition number, vehicle make and year, SAVVA dating no;.and total score of all starters.	Number of Participants (i.e. riders, Drivers & navigators).R11.00
* Report on accidents and/or incidents if applicable.	Cost of permit R_____ 150.00
	TOTAL PAYABLE R_____
	ADDITIONAL / REFUND R_____
NOTE: Refer to VSR32(d) re. penalties for late submissions of Results and Clerk of the Course Report	