



Certification of Manufacturing Standards and Authorization for Release of Testing Data

Please print all information.

The _____
name of sulky manufacturer

hereby certifies: (1) that the manufacturer of the racing sulky model known as _____,
name of sulky model

which is submitted for design and dynamic load and static load testing, is consistent with and in accordance with the established standards and specifications followed in the manufacture of all racing sulkies of the same model, and (2) that said sulky manufacturer will not manufacture or sell a sulky in the name of a USTA-approved model of sulky if it has different materials, dimensions, or manufacturing methods than the USTA-approved model of sulky. In exchange for the USTA reviewing and testing the submitted sulky as part of the USTA's sulky approval process, said sulky manufacturer agrees that if the USTA learns that a manufacturer has been selling in the name of a USTA-approved sulky a type of sulky that is manufactured using different materials, dimensions, or manufacturing methods than the USTA-approved model, the USTA may impose an appropriate sanction which may include suspension of USTA approval for any or all of the manufacturer's sulkies and/or a reasonable fine not to exceed \$25,000.

It is my understanding that the USTA will evaluate the testing data to determine if the above-named sulky model meets the static load and dynamic or cyclic load requirements of the USTA. I authorize the University of Dayton Research Institute to release all testing data conduct on the above-named sulky model.

Please note there is a \$250 filing fee to apply for USTA certification; the fee must accompany this form. This fee is separate from the testing fee set by the University of Dayton Research Institute. To arrange for sulky testing, please contact David Allen with the University of Dayton at 937.229.4426 or david.allen@udri.udayton.edu.

Name of Sulky Manufacturer: _____

Street Address: _____

City, State/Province, Country, Zip/Postal Code: _____

Business Phone Number: _____ Email: _____

Business Fax Number: _____

Name of Contact Person/Title: _____

Signature: _____ Date: _____

PAYMENT INFORMATION

Total amount to be remitted: \$250.00.

Please do not send cash. **For U.S.:** Pay by check, money order or credit card in U.S. funds only. **Outside U.S.:** Payment is by credit card *only*.

Payment Method: Check Money order Visa/MasterCard Name as appears on card: _____

Complete only if paying by credit card:

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 CVV Code

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Expiration date: ____/____/____ Signature: _____



U.S. Trotting Association
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