

CAR SEAT INFORMATION

Manufacturer: _____ Model # _____

Date of Manufacture: _____ (cannot be more than 5 years old)

Seller # _____ Item # _____

I certify that this car seat has never been involved in an accident.

Print Name _____

Signature _____

**attach this form securely to the car seat

ALL of this information must be filled out. If the model number or date of manufacture is not on the car seat, we are unable to sell the item

To be completed by CHECK-IN CREW:

Does the frame of the car seat have any visible cracks? Yes ___ No ___

Does the locking mechanism function properly? Yes ___ No ___

LL Committee member recall check _____
