

## Flex PLI Logbook for the IG GTR9-PH2 Round Robin Tests

Please return to: gehring@boehme-gehring.de or fax-no. +49 2204 962513

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### User Information

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Company:  
(Name, Location)

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Contact person:  
(Name,  
E-mail-address,  
Tel.-no.)

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### Impactor Information

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Serial number:  
(SN01, SN03, E-Leg)

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Test period:  
(Date from/to or calendar week)

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Number of vehicle tests performed  
(At least approximately)

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Number of tests (if known) in which a result exceeds the threshold limit by more than 10%:  
(Threshold limits: Tibia Bending Moments: 340 Nm,  
MCL: 22 mm, ACL and PCL: 13 mm.  
+10%=> 374 Nm, 24.2 mm, 14.3 mm)

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Problems or any specific observations during this test series:  
(Repairs, adjustments, failures, etc.)

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Laboratory (company name, location) in which the impactor certification was performed  
before this vehicle test series (if known):

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Laboratory (company name, location) in which the impactor certification will be performed  
after this vehicle test series (if known):

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Other remarks:

