

Appendix D Structural Equivalency Form

This form must be completed by all teams and submitted no later than the date specified in the Action Deadlines. The FH Technical Committee will review all submissions which deviate from the FH rules. This form must also accompany the vehicle to Technical Inspection.

Structural Equivalency Forms (SEF) and supporting calculations must be submitted electronically in Adobe Acrobat Format (*.pdf). The submissions must be named as follows: **schoolname_SEF.pdf** using the complete school name. Please submit to the person indicated in the Action Deadlines for each event.

*In the event that the FH Technical Committee requests additional information or calculations, teams have one week from the date of the request to submit the requested information.

University Name _____
 Team Contact _____ Telephone Number _____
 E-mail Address _____ Faculty Advisor _____
 Telephone Number _____ E-mail Address _____

Rule Deviated: (check all that apply) and provide summary of change on each line, such as "Eight 5/16 inch Bolts" or "1.00 x 0.065 Square". (Note that FH section numbers may differ from FSAE)

_____ No deviation from Formula Hybrid rules.

X	Rule No.	Rule Description	Design Description
	3.3.4.2	Main Roll Hoop	
	3.3.4.2.F	Main Roll Hoop Attachment to Monocoque	
	3.3.4.3	Front Roll Hoop Material	
	3.3.5.1	Main Roll Hoop Bracing	
	3.3.5.2	Front Roll Hoop Bracing	
	3.3.5.3	Monocoque Bracing Attachment	
	3.3.6.1	Front Bulkhead	
	3.3.6.1.D	Monocoque Front Bulkhead	
	3.3.6.2	Front Bulkhead Support	
	3.3.6.2.D	Monocoque Front Bulkhead Support	
	3.3.6.3	Impact Attenuator Attachment	
	3.3.8.1	Tube Frames Side Impact Structure	
	3.3.8.2	Composite Monocoque Side Impact Protection	
	3.3.8.3	Metal Monocoque Side Impact Protection	
	3.4.1E	Monocoque Safety Harness Attachment	

ATTACH PROOF OF EQUIVALENCY Please see "[Structural Equivalency Guide](#)" on FSAE website for details of proof of equivalency calculations and supporting documentation.

The advisor signature below indicates that the team advisor has reviewed this form. It does not indicate that the advisor certifies its accuracy.

Team Advisor _____ Date _____

Team Advisor Name (please print) _____

TECHNICAL COMMITTEE DECISION/COMMENTS

Approved by _____ Date _____

NOTE: THIS FORM AND THE APPROVED COPY OF THE SUBMISSION MUST BE PRESENTED AT TECHNICAL INSPECTION AT EVERY FORMULA HYBRID EVENT ENTERED