

## DOCUMENT Nº 191 **DÉCISION DES COMMISSAIRES SPORTIFS** STEWARDS' DECISION

PÉNALITÉ INFLIGÉE AU CONCURRENT (NOM) : PENALTY INFLICTED UPON THE COMPETITOR (NAME)

NATIONALITÉ / NATIONALITY:

Nº: No .:

545

PILOTE: DRIVER:

**BOUCHARD Antton** 

Concerne la partie de la compétition x30 MINI - Qualifying Heat B-C

Concerns the part of the competition:

## ÉNONCÉ / STATEMENT:

Disqualification from the above-mentioned Session

## MOTIF / REASON:

The Stewards having received a report from the Judge of Facts (Doc n° 167) requested by the Race Director, having examined this report, summoned and heard the Driver and Entrant concerned (Summon Doc n° 188), have considered the following matter, determine the following: \_The above-mentioned Driver caused an collision – an incident as defined in Art. 2.24 of the 2024 CIK-FIA General Prescriptions. In the session concerned in the last lap at MP 9 to finish line made contact with kart (kart n° 611) and following of this manoeuvre kart no 611 went off the track. \_This fact is a violation against the Art. 3.6.2 e of the 2024 FIA Code of Driving Conduct. \_The Stewards impose this penalty according to Art.2.24 of the 2024 CIK-FIA General Prescriptions and Art.12.4 of the 2024 FIA International Sporting Code. \_The Competitor is reminded of his right to appeal in accordance with Art. 15 of the 2024 FIA International Sporting Code, within the

Date / Date: 29/11/2024

Heure / Time: 16:20

Président du Collège / Chairman of the Panel:

Kris LAMBRECHT (BEL)

Nom / Name

Membres du Collège / Members of the Panel:

Manuel BERNABÉ (ESP)

Pere SAURA (ESP)

Signature

NOTIFICATION AU CONCURRENT CONCERNÉ / NOTIFICATION TO THE RELEVANT COMPETITOR

Je soussigné:

I undersigned:

Nom personnel / personal name

Représentant du Concurrent : BOUCHARD

Representing the Competitor:

Nom du Concurrent / Competitor name

Certifie avoir reçu notification du document N° Certify that I have been notified of document No.

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des Commissaires Sportifs de la Compétition

by the Stewards of the Competition.

Date:

Heure / Time:

Signature:

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