



# الشركة الفنية لخدمات السلامة والفحص الفني ش.م.م

## SAFETY TECHNICAL SERVICES AND INSPECTIONS

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### MAGNETIC PARTICLE INSPECTION REPORT

|                                                                                                                                                                                                                                                                                                      |                                                                      |                           |
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| Date of Inspection:<br>22/01/2026                                                                                                                                                                                                                                                                    | Report number:<br>MN/6864/26/01/12                                   | Job no:<br>6864           |
| Name and Address of owner for whom the thorough examination was made:<br><br>TRUCK OMAN LLC<br>SULTANATE OF OMAN                                                                                                                                                                                     | Address of premises at which the examination was made:<br><br>RUSAYL |                           |
| Method: WET<br>Surface Condition: Acceptable                                                                                                                                                                                                                                                         | Material: Carbon Steel<br>Equipment: Permanent magnet Yoke           | Test temperature: Ambient |
| Area Inspected (tick the appropriate box):<br><br><input type="checkbox"/> Weldment areas <input type="checkbox"/> Stress Areas <input type="checkbox"/> Full Body <input checked="" type="checkbox"/> Others [TOP SURFACE ONLY]                                                                     |                                                                      |                           |
| WHITE CONTRAST PAINT: Magnavis WCP                                                                                                                                                                                                                                                                   | MAGNETISING METHOD: Wet suspension black ink                         |                           |
| BLACK MAGNETIC INK: Magnaflux 7HF                                                                                                                                                                                                                                                                    | ACCEPTANCE CODE: ASME V ARTICLE 7 , ASTM E709, AWS D1.1              |                           |
| DESCRIPTION AND IDENTIFICATION OF THE EQUIPMENT:                                                                                                                                                                                                                                                     |                                                                      |                           |
| <u>FIFTH WHEEL</u><br><br>MAKE: JOST<br><br>TYPE: JSK39DV1-46<br><br>SERIAL NO: 33DD0300335C<br><br>CHASIS NO: LZZ8CLXD0RC591172<br><br>REG NO: 5835 YR<br><br>FLEET NO: TO 2102<br><br><br><br><br><br><br><br><br><br>Qty: 1no.<br><br>Date of Last MPI/ Cert No (If any): <b>AT/4694/25/08/12</b> |                                                                      |                           |
| Result of the above test:<br><br>MPI TEST CARRIED OUT SATISFACTORILY, FOUND NO RELEVANT INDICATIONS AT THE TIME OF INSPECTION                                                                                                                                                                        |                                                                      |                           |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| Inspected by, Name & Signature:<br>MIDHUN CS                                                                                                                                                                                                                               |    | Latest date by which next MPI must be carried out:<br><br>21/07/2026 |
| Qualification: ASNT L2                                                                                                                                                                                                                                                     |                                                                                       |                                                                      |
| Name and address of employer of persons making and authenticating this report:<br><br>Address: SAFETY TECHNICAL SERVICES AND INSPECTIONS<br>P.O. Box 3288, Airport Heights PC 111 Sultanate of Oman.<br><a href="mailto:lifting@safetyoman.com">lifting@safetyoman.com</a> |  |                                                                      |