



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

## SAFETY TECHNICAL SERVICES AND INSPECTIONS

Tel :+968 24502589, Fax : +968 24590272. Email: stsi@safetyoman.com, Website: www.safetyoman.com  
P.O. Box 3288, Airport Heights P.C. 111, Sultanate of Oman.



### MAGNETIC PARTICLE INSPECTION REPORT

|                                                                                                                                                                                                                                    |                                                                     |                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------------|
| Date of Thorough Examination:<br>27.09.2025                                                                                                                                                                                        | Report number:<br>AT5222.25.09.57                                   | Job no:<br>5222           |
| Name and Address of owner for whom the thorough examination was made:<br><br>TRUCK OMAN<br>SULTANATE OF OMAN                                                                                                                       | Address of premises at which the examination was made:<br><br>HAIMA |                           |
| Method: WET<br>Surface Condition: Acceptable                                                                                                                                                                                       | Material: Carbon Steel<br>Equipment: Permanent magnet Yoke          | Test temperature: Ambient |
| Area Inspected ( tick the appropriate box):<br><input type="checkbox"/> Weldment areas <input type="checkbox"/> Stress Areas <input type="checkbox"/> Full Body <input checked="" type="checkbox"/> Others                         |                                                                     |                           |
| 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:<br><b>FIFTH WHEEL</b><br>Make: JOST<br>Type: JSK 38C<br>Reg no: 9509 WK<br>Owner id : TO 2303<br>Qty: 1 no<br>Date of Last MPI/ Cert No( If any): 06.11.2024 (MM1334.11.24.06.12) |                                                                     |                           |
| Result of the above test :<br>MPI TEST CARRIED OUT SATISFACTORILY, FOUND NO RELEVANT INDICATIONS AT THE TIME OF INSPECTION                                                                                                         |                                                                     |                           |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|
| Inspected by, Name & Signature :<br>Anoop Thankachan<br><br>Qualification : ASNT L2                                                                                                                                                                                        |  | Latest date by which next MPI must be carried out:<br><br>26.03.2026 |
| 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> |  |                                                                      |