



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.



CERTIFICATE OF THOROUGH EXAMINATION AND TEST

Certificate No: G/46840/21/06/01

Date of Inspection: 21/06/2021

| | |
|---|---------------------------------|
| Name and Address of the Owner: | Truck Oman Equipment Rental |
| Maker & Date of Manufacture: | CAT/2011 |
| Place of Inspection: | Jiffnain |
| Ref. Standard: | ISO22915-2 / BS EN 474-3/SP2275 |
| Registration No. & Owner No.: | 1549 ML/ PLM-1521 |
| Model No. and Serial No.: | 930H/CAT 0930HKDHC03123 |
| Running hours: | 24210 Hrs |
| Manufacturer's documentation: | In Service Equipment |
| Date of Previous inspection / cert no: | 28/02/2012; K/46015/03 |
| Date of Next inspection: | 21/12/2021 |
| Date of Previous load test / cert no: | 29/11/2015; MP/30500 |
| Date of Next load test: | 31/10/2024 |
| Availability of operations manual in cabin: | Available |
| Availability of daily check report: | Available |

Description

Diesel powered hydraulic Operated Wheel Loader With Forks SWL: 5000 kgs @ 600 mm load center.

Test carried out according to tabulated column

| Description of test: | Test load applied In kgs | S.W.L In kgs |
|--|--------------------------------|--------------------|
| | --- | 5000 Kg @ 600 mm |
| Visual inspection, Functional test & Performance test carried out. | | |
| Max. Lifting Height: 3700 mm | | |
| Hydraulic creep : Nil | | |

Conclusion: Fit for its intended use at the time of inspection. / Refer to checklist- Annexure of certificate

This certificate becomes invalid if any Alteration/Major Repair and modification is done.

This is to certify that the undersigned competent representative, did attend to examine the item described above in accordance to the aforementioned standard. At the time of inspection, the said item were found to be free from flaws, deformations or other defects. The equipment is satisfactory for its intended use within the limits specified and at the time of inspection was found to be satisfactory for further use, provided there is continuous maintenance applied, qualified operators employed and implementation of our remarks and recommendations.

Approved by, Name & Signature: Gishin Thomas

Inspected by, Name & Signature: Infanso Oswin





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Annexure of certificate of test & thorough examination

Certificate No: G/46840/21/06/01

Date of Inspection: 21/06/2021

| Status Legend: S- Satisfactory NA-Not applicable F-Findings CF-Critical Findings | | | | | |
|--|--|---------------------|-----|---|--------|
| No. | Description | Status | No. | Description | Status |
| 1 | Operations Manual/Catalogue | S | 17 | All gauges in cab | S |
| 2 | Monthly Inspection record | S | 18 | Overhead & foot guard | S |
| 3 | Maintenance records | S | 19 | Exhaust system | S |
| 4 | OEM Specification plate | S | 20 | Side shifting function (if applicable) | NA |
| 5 | Tires, rims, wheel bolts and axles | S | 21 | Horn, reverse alarm, rotating warning light | S |
| 6 | Masts and Back rest , carriage | NA | 22 | Lights & indicators | S |
| 7 | Forks and its extensions, slide end stopper, locks | S | 23 | Seat and seat belts | S |
| 8 | Load chain and its assemblies | NA | 24 | Parking brake and foot brake function | S |
| 9 | Side rollers and roll over cage | NA | 25 | Fire extinguisher | S |
| 10 | Safety devices | S | 26 | Display markings (SWL, tire pressure, insp. date, due date) | S |
| 11 | Battery and its connections | S | 27 | Full functional test | S |
| 12 | Hydraulic system & hoses and end fittings | S | 28 | Rated load test | S |
| 13 | Electrical system & Cables | | 29 | Overload test | NA |
| 14 | Cooling system | S | 30 | NDT(If applicable) | F |
| 15 | Steering function | S | 31 | Other Test (If applicable) | NA |
| 16 | All controls levers function & symbols legible | S | 32 | General Condition | S |
| Details of tools/equipments used: STS-LD-51; STS-LD-59 | | | | | |
| Findings/Critical Findings Report | | | | | |
| F/CF | No. | Remarks | | | |
| F | 30 | 21/06/2021; G/46840 | | | |
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CERTIFICATE OF THOROUGH EXAMINATION & TEST

| | | |
|---|------------------------------------|------------------|
| Date of Thorough Examination: 21/06/2021 | Report number: G/46840/21/06/02 | Job no: 46840 |
|---|------------------------------------|------------------|

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|---|---|
| Name and Address of owner for whom the thorough examination was made: TRUCK OMAN EQUIPMENT RENTAL LLC SULTANATE OF OMAN | Address of premises at which the examination was made: JIFNAIN |
|---|---|

| Description and identification of the equipment: | Test Load | S.W.L |
|--|-----------|---|
| MATERIAL HANDLING ARM Make : CATERPILLAR (MSC 110463) Serial no. : 229-9714 Reg. No. : 1549 ML Plant ID No. : PLM 1521 Visual Inspection & Functional Test Carried Out | --- | 2.33 t @ 1 st boom 1.86 t @ 2 nd boom 1.55 t @ 3 rd boom |

| |
|--|
| Details of tools/equipments used: STS-VC-7949; STS-LD-63 |
|--|

| | |
|--|---|
| Date of Previous Examination/ cert no: 28/12/2020; O/44998/20/12/01 | Date of Next Examination: 20/12/2021 |
| Date of previous Load test/ Cert no: 05/04/2018; G/36878/18/04/05 | Date of Next Load test: 04/04/2022 |

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|------------------------|
| Comments(If any): NONE |
|------------------------|

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| RESULT: The above mentioned equipment was found to be in order for its intended use at the time of inspection. <i>This certificate becomes invalid if any Alteration/Major Repair and modification is done.</i> This is to certify that the undersigned competent representative, did attend to examine the item described above in accordance to the aforementioned standard. At the time of inspection, the said item were found to be free from flaws, deformations or other defects. The equipment is satisfactory for its intended use within the limits specified and at the time of inspection was found to be satisfactory for further use, provided there is continuous maintenance applied, qualified operators employed and implementation of our remarks and recommendations. |
|--|

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| Inspected by, Name & Signature Infanso Oswin | Approved by, Name & Signature Gishin Thomas | |
| Name and address of employer of persons making and authenticating this report: Address: SAFETY TECHNICAL SERVICES AND INSPECTIONS P.O. Box 3288. Airport Heights PC 111 Sultanate of Oman. lifting@safetyoman.com | | |

