



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: MP/47738/21/12/01

Date of Inspection: 19/12/2021

Name and Address of the Owner:	Premier Logistics
Maker & Date of Manufacture:	CATERPILLAR
Place of Inspection:	FAHUD #872
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:	25916 Hrs
Manufacturer's documentation:	In Service Equipment
Date of Previous inspection / cert no:	21/06/2021; G/46840/21/06/01
Date of Next inspection:	18/06/2022
Date of Previous load test / cert no:	21/06/2021; G/46840/21/06/01
Date of Next load test:	21/06/2022
Availability of operations manual in cabin:	Available
Availability of daily check report:	Available

Description

Diesel powered hydraulic Articulated Wheel Loader c/w fork SWL: 5000 kgs @ 600 mm load center.

Test carried out according to tabulated column

Description of test:	Test load applied	S.W.L
	In kgs	In kgs
Visual inspection, Functional test & Performance test carried out.		
Max. Lifting Height: 3700 mm		
Hydraulic creep : Nil		5000 Kg
Fork Serial No: L1 & R1		

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: **MP/47738/21/12/01**

Date of Inspection: **19/12/2021**

Status Legend:		S- Satisfactory	NA-Not applicable	F-Findings	CF-Critical Findings	
No.	Description	Status	No.	Description		Status
1	Operations Manual/Catalogue	F	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-75; STS-LD-80

Findings/Critical Findings Report

F/CF	No.	Remarks
F	1	Provide Operation Manual/Catalogue in Cabin
-	-	Glass Broken
-	-	Fork One Left Side Bend
-	-	Horn Not Working
-	-	Hose Leak From Engine Side



MAGNETIC PARTICLE INSPECTION REPORT

Date of Thorough Examination: 19/12/21	Report number: MP/47738/21/12/02	Job no: 46840
Name and Address of owner for whom the thorough examination was made: TRUCK OMAN EQUIPMENT RENTAL SULTANATE OF OMAN		Address of premises at which the examination was made: JIFFNAIN
Method: WET Surface Condition: Acceptable	Material: Carbon Steel Equipment: Permanent magnet Yoke	Test temperature: Ambient
Area Inspected (tick the appropriate box): <input checked="" type="checkbox"/> Weldment areas <input checked="" type="checkbox"/> Stress Areas <input type="checkbox"/> Full Body <input 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: <u>FORK MPI</u>		
ID No : L1, R1		
Reg. No. : 1549 ML / PLM 1521		
Qty: 1no.		
Date of Last MPI/ Cert No(If any): 21/06/2021; G/46840/21/06/04		
Result of the above test :		
MPI TEST CARRIED OUT SATISFACTORILY, FOUND NO RELEVANT INDICATIONSAT THE TIME OF INSPECTION		

Inspected by, Name & Signature : Koshy Mathew Qualification : ASNT L2		Latest date by which next MPI must be carried out: 18/12/2022
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		

