



# 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 Thorough Examination:<br>06/10/2025                                                                                                                                                                                                                                                                                                                        | Report number:<br>MN/5326/25/10/06                                 | Job no:<br>5326           |
| 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>ADAM |                           |
| 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 checked="" type="checkbox"/> Weldment areas <input type="checkbox"/> Stress Areas <input checked="" 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:<br><br><u>KING PIN AND FILLET WELD</u><br><br>Make: JOST (3.5")<br><br>Trailer Reg: 1124 HK<br><br>Fleet no: PLM 1618<br><br>[I] shaped cylindrical king pin.<br>Top head 114mmØ<br>Intermediate 89mmØ<br>Bottom head 111mmØ<br><br>Qty: 1nos<br>Date of Last MPI/ Cert No (If any): 14/04/2025; AT/1589/25/04/14 |                                                                    |                           |
| 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 C S                                                                                                                                                                                                                              |  | Latest date by which next MPI must be carried out:<br><br>05/04/2026 |
| 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> |  |                                                                      |