



## REPORT OF THOROUGH EXAMINATION OF POWER DRIVEN WINCHES

|                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                 |                  |
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| Date of Thorough Examination:<br>10/06/2018                                                                                                                                                                                                                                                                                                                                                                           | Report number:<br>MP/37703/18/06/06                             | Job no:<br>37703 |
| Name and Address of the Owner of the Equipment<br>TRUCK OMAN (NORTH)<br>SULTANATE OF OMAN                                                                                                                                                                                                                                                                                                                             | Address of premises at which the examination was made:<br>HAIMA |                  |
| Description and identification of the equipment:<br><u>TRUCK MOUNTED WINCH – EMCE</u><br>Owners id : TO-605<br>Serial no. : 113<br>Type : H 450 P<br>Power Source : Hydraulic<br>Steel Wire rope : 28mmX50m wire rope fitted with 26mm chain and grab hook via steel stopper<br>Wire rope cert. No.: A/147.17<br>Wire rope Serial no. : B17-1686<br>Hauling Load : 45 t @ 1 <sup>st</sup> layer<br>Reg. No. : 9722 MR |                                                                 |                  |
| Date of Previous Examination/ cert no:<br>13/12/2017 ; RA/36093/17/12/05                                                                                                                                                                                                                                                                                                                                              | Date of Next Examination:<br>09/12/2018                         |                  |
| Ref. Standards: BS EN 14492 ,PR 1708                                                                                                                                                                                                                                                                                                                                                                                  |                                                                 |                  |
| Comments(If any): Refer Annex for Checklist                                                                                                                                                                                                                                                                                                                                                                           |                                                                 |                  |
| Particulars of any repair, renewal or alteration required to remedy the defect identified above:<br>NONE                                                                                                                                                                                                                                                                                                              |                                                                 |                  |
| Identification of any part found to have a defect which is or could become a danger to persons and a description of the defect:(If none state NONE)<br>NONE                                                                                                                                                                                                                                                           |                                                                 |                  |
| IS THIS EQUIPMENT FIT FOR PURPOSE?                                                                                                                                                                                                                                                                                                                                                                                    | YES                                                             | x NO             |

Approved by, Name & Signature  
Gishin Thomas



Inspected by, Name & Signature  
Madhu Pillai

# Annexure of Report of Thorough Examination of Power Driven Winches

**Certificate No: MP/37703/18/06/06**

**Date of Inspection: 10/06/2018**

| SECTION                             | ✓   | X | REMARKS |
|-------------------------------------|-----|---|---------|
| Structural Frame/Dogging Fixture    | ✓   |   |         |
| Drums/Sheaves/Pulleys               | ✓   |   |         |
| Wire Rope                           | ✓   |   |         |
| Wire Rope Termination/ Structures   | ✓   |   |         |
| Ratchet & Pawl/Braking& Clutches    | ✓   |   |         |
| Electric Cables                     | N/A |   |         |
| Hooking Devices                     | ✓   |   |         |
| Operational Control Devices         | ✓   |   |         |
| General Maintenance                 | ✓   |   |         |
| Name Plate/Safety Instructions      | ✓   |   |         |
| Cleanliness & Upkeep                | ✓   |   |         |
| Swivel / Boomer Chain / Accessories | ✓   |   |         |

|                                                                                                                                                                                                                                   |                                                                                                                                                          |                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Inspected by, Name &amp; Signature</b><br><b>Madhu Pillai</b><br>                                                                           | <b>Approved by, Name &amp; Signature</b><br><b>Gishin Thomas</b><br> |  |
| <b>Name and address of employer of persons making and authenticating this report:</b><br><b>SAFETY TECHNICAL SERVICES PO BOX 3288. SEEB. PC 111 MUSCAT.</b><br><a href="mailto:lifting@safetyoman.com">lifting@safetyoman.com</a> |                                                                                                                                                          |                                                                                       |