



# 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>11/04/2022                                                                                                                                                                                                                                                                                                       | Report number:<br>MP/48150/22/04/02                                    | Job no:<br>48150          |
| Name and Address of owner for whom the thorough examination was made:<br><br>TRUCK OMAN EQUIPMENT RENTAL<br>SULTANATE OF OMAN                                                                                                                                                                                                                     | Address of premises at which the examination was made:<br><br>JIFFNAIN |                           |
| 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 type="checkbox"/> Weldment areas <input type="checkbox"/> Stress Areas <input type="checkbox"/> Full Body <input checked="" type="checkbox"/> Others [ TOP SURFACE]                                                                                                                     |                                                                        |                           |
| 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>Make : JOST ( 3.5")<br>ID NO : 1632<br>Trailer Reg: 1018BK<br><br>[I] shaped cylindrical king pin.<br>Top head 114mmØ<br>Intermediate 89mmØ<br>Bottom head 111mmØ<br><br>Qty: 1 no<br><br>Date of Last MPI/ Cert No( If any): 07/07/2018 ; MT – 59515E |                                                                        |                           |
| 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>Koshy Mathew<br><br>Qualification : ASNT L2                                                                                                                                                                                            |  | Latest date by which next MPI must be carried out:<br><br>10/04/2023 |
| 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> |  |                                                                      |

