



# الشركة الفنية لخدمات السلامة والفحص الفني ش.م.م

## SAFETY TECHNICAL SERVICES AND INSPECTIONS

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### MAGNETIC PARTICLE INSPECTION REPORT

|                                                                                                                                                                                                                                                                                      |                                                                        |                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------|
| Date of Thorough Examination:<br>10/12/2020                                                                                                                                                                                                                                          | Report number:<br>VI/45607/20/12/03                                    | Job no:<br>45607                                                 |
| 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 ONLY]                                                    |                                                                        |                                                                  |
| 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>FIFTH WHEEL</u><br><br>Make : JOST<br><br>Type : JSK 38 C<br><br>Serial No. : NA<br><br>Reg. No. : 6727 A.K / TER 1068<br><br><br><br><br><br><br><br><br><br><br>Qty: 1no.<br><br>Date of Last MPI/ Cert No( If any):N/A |                                                                        |                                                                  |
| Result of the above test :<br><br>MPI TEST CARRIED OUT SATISFACTORILY, FOUND NO RELEVANT INDICATIONS AT THE TIME OF INSPECTION                                                                                                                                                       |                                                                        |                                                                  |
| Inspected by, Name & Signature :<br>Koshy Mathew                                                                                                                                                                                                                                     |                                                                        | Latest date by which next MPI must be carried out:<br>09/12/2021 |
| 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>           |                                                                        |                                                                  |

