



# 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>13/06/2021                                                                                                                                                                                                                                                                                                                       | Report number:<br>GTK/46933/21/06/01                               | Job no:<br>46933          |
| Name and Address of the Owner of the Equipment<br>TRUCK OMAN<br>SULTANATE OF OMAN                                                                                                                                                                                                                                                                                 | Address of premises at which the examination was made:<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><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><u>FIFTH WHEEL</u><br>MAKE: JOST<br>TYPE: JSK 38 C<br>SERIAL NO: 1347071163<br>REG NO: 825 WB<br>OWNER ID: TER 1088<br><br>Qty: 1 no<br>Date of Last MPI/ Cert No( If any): N/A<br>Result of the above test :<br>MPI TEST CARRIED OUT SATISFACTORILY, FOUND NO RELEVANT INDICATIONS AT THE TIME OF INSPECTION |                                                                    |                           |

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| Inspected by, Name & Signature :<br>Vijeesh Ravi<br>Qualification : ASNT L2                                                                                                                                                                                            |  | Latest date by which next MPI must be carried out:<br>12/06/2022 |
| Name and address of employer of persons making and authenticating this report:<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> |  |                                                                  |

