

REPORT OF A THOROUGH 12 MONTHLY EXAMINATION INCLUDING LIFTING ATTACHMENTS

This report complies with the requirements of the Lifting Operations and Lifting Equipment Regulations 1998

Date of thorough Examination: 26/04/2022		Date Of Report:		Report Number: 33/01	
Name and Address of Employer for whom the Thorough examination was made	Address of premises at which the examination was made.				
William Bradshaw Ltd Portside North Ellesmere Port		Riverside Market Harborough			
Cheshire CH65 2HQ	LE16 7PX	LE16 7PX			
Description and Identification of the Equipment:	Safe Working Load(s):		Date of Manufacture if Date of last thorough Known: examination:		
Make: CASEModel: 988Serial Number: CGG0232245Fleet Number: 33Number of Components : 1	For the correct SWL refer to the supplied duty charts	Unkn	Unknown Unknown		
Delete as necessary		Delete as necessary			
Is this the first examination after installation Yes		Was the examination carried out: Within an interval of 6 Months? No			
Has the equipment been installed correctly Yes	Within an interval of 12 M	Within an interval of 12 Months? No			
After the occurrence of exceptional circumstances? No 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) None					
Is the above a defect which is of immediate danger to persons?				No	
Is the above defect, which is not yet but could be become a danger to persons? No (If yes state the date by when)					
Particulars of any repair, renewal or alteration required to remedy the defect identified above: None					
None None Particulars of any tests carried out as a part of the examination: (if none state NONE) Visual Inspection Only Yes No Bogie Inspection Yes No Brake Test Yes No- Bogie Inspection Yes No SLI/RCI Test Yes No Make GKD 3RCI+ S/No 2175TM Horn Test Yes No AUX lift point Yes No S.WL 10T Machine Hrs 6576.4 Hrs Quick hitch Yes No Make Engcon S60 Model Quick Hitch S/No QH33 S.W.L 10T					
IS THIS APPLIANCE OR ACCESSORY SAFE TO OPERATE? Yes					
Name of person making this report: Nam report	ne of this person authenticating	his person authenticating this Latest date by which next thorough examination must be carried out:			
	nt Name: Carl Chippendale nature: <i>C Chippendale</i>		25/04/2023		
Name and Address of employer making and authenticating this report King Transport Equipment Riverside, Market Harborough, LE16 7PX					