

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

This report complies with the r						
Date of thorough Examination:		Date Of Repo		Report Number:		
12/12/2022		12/12/2022 47/01		47/01		
Name and Address of Employer for who Thorough examination was made	om the	Address of premi	ises at which the	examination	was made.	
William Bradshaw Ltd		King Rail				
Portside North		Riverside				
Ellesmere Port		Market Harborough	า			
Cheshire CH65 2HQ		LE16 7PX				
Cheshire Chios zhiQ		LL 10 /1 X				
Description and Identification of the Equipment:		Safe Working Load(s):		tte of Manufacture if Date of last thou Known: examination		
Make : CASE		For the correct				
Model : 988		SWL refer to the	77 1		Unknown	
Serial Number : CGG0232312		supplied duty	Unkno	wn		
Fleet Number : 47		charts				
Number of Components: 1		Charis				
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	Within an interval of 12 Months? No					
	After the occurrence of exceptional circumstances? No					
Identification of any part found to have a none state NONE)	ı defect whic	ch is or could become a da	nger to persons (and a descrip	tion of the defect: (if None	
Is the above a defect which is of immedia	ite danger t	o persons?			No	
Is the above defect, which is not yet but of (If yes state the date by when)			No			
Particulars of any repair, renewal or alt	eration real	ired to remedy the defect i	dentified above:			
arnemars of any repair, renewal or all	гиноп геди	irea io remeay ine aejeci i	uemijieu ubove.		None	
Particulars of any tests carried out as a	part of the e	examination: (if none state	NONE)		110110	
Visual Inspection Only Yes No-	punt of the c	(y none sime		spection	Yes No	
Brake Test Yes No-				-	Yes No	
	1ake GKD .	3RCI+ S/No 2304TM	Horn Te		Yes No	
AUX lift point Yes No S				Hrs 6656Hr	S	
* -		n S60 Model Quick Hi		H47 S.W.L 1		
IS THIS APPLIANCE OR ACCESSOR	Y SAFE TO	O OPERATE?			Yes	
Name of person making this report: Name of report:		of this person authenticatin	g this Lates	Latest date by which next thorough		
		•	_	examination must be carried out:		
		Name: Carl Chippendale ure: <i>& Chippendale</i>		11/12/2023		
Name an		f employer making and au		report		

King Transport Equipment Riverside, Market Harborough, LE16 7PX