REPORT OF THOROUGH EXAMINATION OF LIFTING EQUIPMENT Lifting Operations and lifting equipment regulation 1998 (Regulations 9)

love	r (and or plant o	wner) Philin	Shovlin Plant H	lire L	ΓD					
mploye	r (and or plant o	when, rining	Shovini i iant i							
Address.		usiness Comple	×							
	Bennett Stree	et								
	West Gorton Manchester	M12.5AU								
Address	at which the	141.2.01.0								
	ion was made.	As above								
	2110	260	Wilsonlad Unidea	ulia E	vegyator		Dis	tinguishing Num	ber K118915	
Description of lifting equipment. 360 Wheeled Hydrau Makers Name. LIEBHERR					Inc Excavator			Year of Manufacture. N/K		
	Name. Configuration.		load Chart					Fleet No Giga L - 8915		
J II L W								1	1	
Nature o	f Examination .	9(1)	9(2)		9(3)(a)(i)	9(3)(a)		9(3)(a)(iii)	9(3)(a)(iv)	
						X				
Dantianle	ers of any test.	None								
Particula	irs of any test.	None								
Ohaamia	tions and condit	ions of rones c	hains attachmer	nts etc						
Observations and conditions of ropes, chains, attachmen								WLL	Pass Y/N	
Description				Condition Good				7500KGS	YES	
Auxiliar	y Lifting Point	ulta ana SD I A I	T 01)	Good				N/A	YES	
RCI (for Test Load Results see SP-LAFT 01)				Good				10000Kgs	YES	
DIPPER PIN Fitted with Geth Quick Hitch				Good				10500Kgs	YES	
					ould become a d					
State de within a	escription of the a specified time.	defect and any None.	repair or renewa	ıl or al	terations require	d to remedy	the def	ect either immed	nately of	
Other d	efects and reme	dies								
		None								
Date of	flast thorough e	xamination.							20.03.24	
Date of last thorough examination. Latest date by which the next thorough examination mu					carried out.				10.03.26	
Date of thorough examination.									11.03.25	
		*	thoroughly exa	mined	(unless otherwis	se stated) an	id, subje	ct to any remedia	al action	
Name	and Address of	Competent Pers	an Damian Sch	ofield	l. Brook Busine	ss Complex	, Benne	tt Street, West G	orton, Manchester.	
Signat	ure 1	ノバト					11.03.2			
-						Date	11.03.2	J		
Qualif	ications. Fitte	r								
Name	and Address of	person authenti	cating report if	liffere	ent from above					
						Date	11.03.2	5		
Signat	ure								<u> </u>	
Date of	of report 11.03.2	5								
							T= >	No.	11	
							Issue l	NO		

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Issue Date:	Sept 2012
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