



**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: 17/04/2024		Date Of Report: 17/04/2024		Report Number: 24/01	
Name and Address of Employer for whom the Thorough examination was made William Bradshaw Ltd Portside North Ellesmere Port Cheshire CH65 2HQ			Address of premises at which the examination was made. King Rail Riverside Market Harborough LE16 7PX		
Description and Identification of the Equipment: Make : CASE Model : 988 Serial Number : CGG0232253 Fleet Number : 24 Number of Components : 1		Safe Working Load(s): For the correct SWL refer to the supplied duty charts		Date of Manufacture if Known: Unknown	Date of last thorough examination: Unknown
<i>Delete as necessary</i>		<i>Delete as necessary</i>			
Is this the first examination after installation Yes		Was the examination carried out:			
Has the equipment been installed correctly Yes		Within an interval of 6 Months?		No	
		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? (If yes state the date by when)					No
Particulars of any repair, renewal or alteration required to remedy the defect identified above:					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		Wheel Monitoring Yes No			
SLI/RCI Test Yes No Make GKD 3RCI+ S/No 01261T		Horn Test Yes No			
AUX lift point Yes No S.WL 5T		Machine Hrs 6439Hrs			
Quick hitch Yes No Make Engcon S60 Model Quick Hitch		S/No QH24 S.W.L 10T			
IS THIS APPLIANCE OR ACCESSORY SAFE TO OPERATE?					Yes
Name of person making this report: Print Name: Carl Chippendale Signature: C Chippendale		Name of this person authenticating this report: Print Name: Carl Chippendale Signature: C Chippendale		Latest date by which next thorough examination must be carried out: 16/04/25	
Name and Address of employer making and authenticating this report King Transport Equipment Riverside, Market Harborough, LE16 7PX					