

Report of Thorough Examination

Name and address of employer for whom this examination is made: 10142 CLONZ 33 SYCAMORE GROVE MIDWINTER BA11 0TB		Record Number: S01632	
		Examination Date: 27-11-17	
Location or address examined at (if different):	Reasons for Thorough Examination After Installation or assembly- In service – within an interval of 6 months – In service – within an interval of 12 months – In accordance with an examination scheme – Following exceptional circumstances – (e.g. accident)-		Tick Box <input checked="" type="checkbox"/>
Details of Truck			
Make: SIQUAN	Model: TIPOZLOE	Serial No: 1498	Fleet No: -
Hours: 3581	Description: CONY MOUNTED CHERRY PICKER	Mast Configuration:	Manufacture Date: 2004
Chain Certificate Seen? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Safe Working Load: (SWL) Kg 200 atmm	Attachments: NA
		SWL with Attachments: Kg.....at.....mm	
Comments:			

DEFECTS

Identification of any part found to have a defect which is or could become a danger to persons and a description of the defect & particulars of any repair, renewal or alteration required to remedy a defect found to be a danger to persons. (Action to take)

Description of Defect:	Timescale for repair, renewal or alteration (if immediate state now)


Chain Elongation (1):		Chain Elongation (2):		Forks:		Date of Previous Examination	Or hours:	Latest date for next examination	Or hours:
Dimension	Wear	Dimension	Wear	Dimension	Wear				
NA	____%	NA	____%	NA	____%	19 4 17		27 5 18	

Other tests performed / comments:

DECLARATION BY THE COMPETENT PERSON

I hereby declare that the equipment described in this report was thoroughly examined in accordance with GN28 and

- No faults have been detected
 Faults have been detected and the above actions are required within the time limits specified-
 The equipment should not be used until the above recommendations are carried out-

Name	Authorised Examiner	Signature
Name and address of company responsible for this Thorough Examination: SOUTH WEST FORKLIFTS	S SMITH	

CHECK LIST FOR THOROUGH EXAMINATION

Make:		Model:		Date of examination:		Record Number:	
SUQUAN		Z200		27-11-17		S01632	
No	Section	Item	Ref	Details of test	Additional comments if appropriate		
1.	Load Handling	Chains	5.1.1	NA			
		Mast & fork carriage	5.1.2	✓			
		Hydraulics	5.1.3	✓			
		Fork arms	5.1.4	NA			
		Attachments	5.1.5	✓			
		Operation	5.1.6	✓			
2.	Braking	Visual check	5.2.1	NA			
		Cables and linkages	5.2.2	NA			
		Pedals and levers	5.2.3	NA			
		Performance, parking & service brakes	5.2.4	NA			
3.	Steering	Mechanical components	5.3.1	NA			
		Hydraulic components	5.3.2	NA			
		Operation- mechanical systems	5.3.3	NA			
4.	Traction I.C.E Electric	Prime mover and transmission	5.4.1	NA			
		Controls, cables & linkages	5.4.2	NA			
		Exhaust system & emissions	5.4.3	NA			
		Battery & cables	5.4.4	NA			
		Tyres	5.4.5	NA			
		Wheels	5.4.6	NA			
		Operation	5.4.7	NA			
5.	Safety Systems	Operation & visual & audible warnings	5.5.1	✓			
		Operation of interlocks	5.5.2	✓			
		Electrical circuits	5.5.3	✓			
		Security & mounting of capacity & data plates	5.5.4	✓			
		Security & mounting of control function markings	5.5.5	✓			
		Lighting, wipers & mirrors	5.5.6	NA			
		Wire guidance systems & aisle interlocks	5.5.7	NA			
6.	Structure	Chassis	5.6.1	✓			
		Overhead guard	5.6.2	NA			
		Load backrest extension	5.6.3	NA			
		Security of all fastenings	5.6.4	✓			
		Sealing/platform	5.6.5	✓			

Additional Information
