



Development Member



GA1

Fleet Number:

HQH196

REPORT OF THOROUGH EXAMINATION

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

Date of Thorough Examination: 07/02/2024		Date of Report: 07/02/2024		Report number: 6M240126																					
Name and Address of employer for whom the thorough examination was made: M J Hickey Plant, Unit 11 SBC Bristol Way, Slough, SL1 3TD			Address of premises at which the examination was made: Connaught Groundworks, 382 Stroude Road, Virginia Water, GU25 4DB																						
Description and identification of the equipment: Quick Hitch Type: Hill Tefra Quick Hitch Quick Hitch S/N: 84668 Equipment Type: Hitachi ZX135US-6 Excavator ID: HCMDAS50V00102393		Safe Working Load(s): In Accordance with manufacture specification.	Date of manufacture if known: Unknown	Date of last thorough examination: 06/02/2023																					
Is this the first examination after installation or assembly at a new site or location? <table border="1"><tr><td>YES</td><td>X</td><td>NO</td><td></td></tr></table>		YES	X	NO		Was the examination carried out:																			
YES	X	NO																							
If the answer to the above question is YES has the equipment been installed correctly? <table border="1"><tr><td>YES</td><td>X</td><td>NO</td><td></td></tr></table>		YES	X	NO		Within an interval of 6 months ? <table border="1"><tr><td>YES</td><td></td><td>NO</td><td>X</td></tr></table>	YES		NO	X	Within an interval of 12 months? <table border="1"><tr><td>YES</td><td></td><td>NO</td><td>X</td></tr></table>	YES		NO	X	In accordance with an examination scheme? <table border="1"><tr><td>YES</td><td>X</td><td>NO</td><td></td></tr></table>	YES	X	NO		After the occurrence of exceptional circumstances? <table border="1"><tr><td>YES</td><td></td><td>NO</td><td>X</td></tr></table>	YES		NO	X
YES	X	NO																							
YES		NO	X																						
YES		NO	X																						
YES	X	NO																							
YES		NO	X																						
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 Found.																									
Is the above an existing or imminent danger to persons *Note-This is a reportable defect				YES	X																				
Is the above a defect which is not yet but could become a danger to persons: (If YES state the date by when) N/A			YES by:																						
Particulars of any repair, renewal or alteration required to remedy the defect identified above: Equipment was found to be in safe working order at time of inspection.																									
Particulars of any tests carried out as part of the examination: (If none state NONE) None.																									

Observations / additional comments relative to this thorough examination:
Equipment was found to be in safe working order at time of inspection.

IS THIS EQUIPMENT SAFE TO OPERATE?			YES	X	NO
Name & Qualifications of person making this report: James Walsh City & Guilds, CITB	Name of person signing or authenticating this report on behalf of the author: Signature: <i>Mal James Walsh</i>	Latest date by which next thorough examination must be carried out: 06/08/2024			
Name and address of employer of persons making and authenticating this report: Walsh Machinery Ltd, 2 Stiven Crescent, Harrow, HA2 9AY					