



**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

<b>Date of thorough Examination:</b> 06/10/11	<b>Date Of Report:</b> 06/10/11	<b>Report Number:</b> FR648/01	
<b>Name and Address of Employer for whom the Thorough examination was made</b> Readypower Readypower House Molly Millers Bridge Wokingham Berkshire RG41 2WY	<b>Address of premises at which the examination was made.</b>  Readypower Kings Langley		
<b>Description and Identification of the Equipment:</b>  Make : <b>Terex</b> Model : <b>Gigarailer</b> Serial Number : <b>180S301297</b> Stock Number : <b>FR648</b> Number of Components :	<b>Safe Working Load(s):</b>  <i>Check valves &amp; RCI Prolec LWPC fitted refer to lift chart supplied.</i>	<b>Date of Manufacture if Known:</b>  2008	<b>Date of last thorough examination</b>  09/08/11
<i>Delete as necessary</i>	<i>Delete as necessary</i>		
<b>Is this the first examination after installation</b> No	<b>Was the examination carried out:</b>		
	<b>Within an interval of 6 Months?</b>		No
<b>Has the equipment been installed correctly</b> Yes	<b>Within an interval of 12 Months?</b>		Yes
	<b>After the occurrence of exceptional circumstances?</b>		No
<b>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)</b>			
			None
<b>Is the above a defect which is of immediate danger to persons?</b>			
			No
<b>Is the above defect, which is not yet but could be become a danger to persons? ( If yes state the date by when)</b>			
			No
<b>Particulars of any repair, renewal or alteration required to remedy the defect identified above:</b>			
			None
<b>Particulars of any tests carried out as a part of the examination: ( if none state NONE)</b>			
<b>Visual Inspection Only</b>			Yes
<b>Brake Test</b>			Yes
<b>Lift Test</b>			Yes
<b>Machine Hrs</b>			1233
<b>IS THIS APPLIANCE OR ACCESSORY SAFE TO OPERATE?</b>			<b>Yes</b>
<b>Name of person making this report:</b>  <b>Print Name: Andrew Fox</b> <b>Signature: <i>Andrew Fox</i></b>	<b>Name of this person authenticating this report:</b>  <b>Print Name: Chris Fitzgerald</b> <b>Signature: <i>C Fitzgerald</i></b>	<b>Latest date by which next thorough examination must be carried out:</b>  06/10/2012	
<b>Name and Address of employer making and authenticating this report</b> <i>Fitzgerald plant services Limited</i> <b>Avondale Way, Avondale Ind. Est., Cwmbran, South Wales, NP44 1TS</b>			