



## PL17 PLANT PRE-START INSPECTION – XQ29YC

|                         |                   |             |
|-------------------------|-------------------|-------------|
| Type and Make           | Assessment Date   | Asset ID    |
| <b>Everdigm on DAF</b>  | <b>03-05-2022</b> | <b>47m</b>  |
| Model                   | Serial Number     | PLANT ID    |
| <b>ECP47CX / FACF85</b> | <b>1086</b>       | <b>MC22</b> |

|   |     |   |    |                          |
|---|-----|---|----|--------------------------|
| <b>IS THE PLANT A CONCRETE BOOM PUMP?</b>   | Yes | X | No | If Yes see section below |
| <b>CONCRETE BOOM PUMP - COPIES REQUIRED</b> |     |   |    |                          |
| Register-able plant current & provided?     |     |   |    | Yes                      |
| Annual inspection provided?                 |     |   |    | Yes                      |
| Monthly boom checks provided?               |     |   |    | Yes                      |
| Monthly pipe thickness provided?            |     |   |    | Yes                      |

| REQUIREMENTS  | PRESENT                                 |                             |
|---|---|-----------------------------|
| Detailed pump risk assessment completed & attached                                | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Operation and maintenance manual included with plant                              | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Service history available for the pump (upon request)                             | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Logbook with pump and available for inspection                                    | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| All safety guards fitted  | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Seatbelt fitted and in good condition   | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Fire extinguisher fitted, charged & holds a current tag attached.                 | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Reverse alarm fitted and working (if required onsite)                             | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| All vehicle systems operational   | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Flashing light fitted and working   | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 3-point contact access  | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Hose burst protection on any hydraulic lifting device                             | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Locking pins in place where required  | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Earthing chain & spike included (if required onsite)                              | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Engine checks done - no leaks, loose items, faulty items, no smoking exhaust, etc | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Perimeter checks done - no cracked windows, tyres good condition, etc             | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

**Other - additional attachments that will be used / additional relevant comments**

**CERTIFICATION BY RESPONSIBLE PERSON i.e. Owner or Owners representative**

I certify that the described pump is to the manufacturer's specifications and is being serviced and maintained by competent personnel to the manufacturer's recommendations.

| NAME             | POSITION | SIGNATURE           | DATE       |
|------------------|----------|---------------------|------------|
| Wayne McClelland | Owner    | <i>W McClelland</i> | 03-05-2022 |

| TO BE COMPLETED BY SITE SUPERVISOR OR REPRESENTATIVE ON SITE |           |      |                      |
|--|-----------|------|----------------------|
| RECEIVED ON SITE BY  | SIGNATURE | DATE | PLANT STICKER NUMBER |
|  |           |      |                      |