singing rock

EASY LIFT

INDIVIDUAL EVIDENCE SHEET

USER:

CONTROL NUMBER OF PPE:

IDENTIFICATION OF THE PPE AND THE PRODUCT HISTORY:

MANUFACTURER:

TYPE (MODEL)

UNIQUE PRODUCTION NUMBER:

DATE OF MANUFACTURE: DATE OF PURCHASE, DATE OF THE FIRST USE:

VISUAL AND TACTILE INSPECTION - body, sheave, rivet:	✓ FIT FOR USE	✗ RETIRE	T SEE THE NOTES
COMPLETENESS, ORIGINAL SHAPE	○	○	○
WEAR, LOSS OF MATERIAL	○	○	○
NICKS, CRACKS, SHARP EDGES	○	○	○
CORROSION, OXIDATION	○	○	○
FUNCTION CHECK:			
FUCTION OF THE MOVING SIDE PLATES	○	○	○
FUNCTION OF THE SHEAVE	○	○	○
WIRE GATE	○	○	○
CONTROL OF TOLERANCES	○	○	○
VERDICT: IF ANY OF THE INSPECTION ITEMS HAS "RETIRE" AS A RESULT, IT IS NOT POSSIBLE TO USE THE PRODUCT ANYMORE.	○	○	

NOTES:

DATE AND TIME OF THE INSPECTION: INSPECTED BY:

DATE OF THE NEXT INSPECTION:

CONTACT:

name:

address:

mobile phone:

email: signature: