



ZCH_Inspection of tip end – C-yoke

| Document ID and revision | Status | Date (yyyy-mm-dd) | Language |
|--------------------------|----------|-----------------------------|----------|
| D4470651/003 | Released | | en-US |
| Product | Project | Applicable work instruction | |
| SG-DD 222/236 NG13 | Generic | D4326773 | |

Checklist

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|----------------------------|-----------|-------------------|----------|
| D4470651/003 | Released | | en-US |
| Original or translation of | ECN | RDS-PP® | DCC |
| Original | C01286473 | =MD | &MDD080 |

| WTG specifications | | |
|-------------------------|--|--|
| Customer / Owner | | |
| Project name | | |
| Project no. | | |
| WTG no. / component no. | | |

1. Introduction

This checklist must be completed at the point of work. Checklists must not be filled out retrospectively and/or by a 3rd party not directly involved in the work performed. Checklists must be filled out legibly.
 If the condition of the work is not in accordance with the checklist content, then the checklist must not be submitted, and site management shall be contacted.


2. Technician and Tools Records

The technician's personal information must be noted in the table below. When ticking off the checkpoints, technicians only need to sign off with their initials.

| Name | Employee no. | Company name | Initials |
|------|--------------|--------------|----------|
| | | | |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |

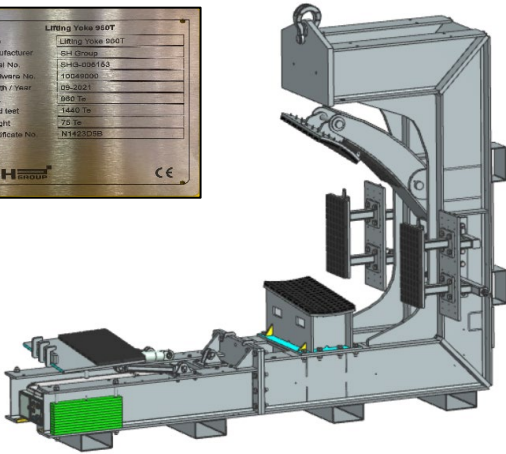

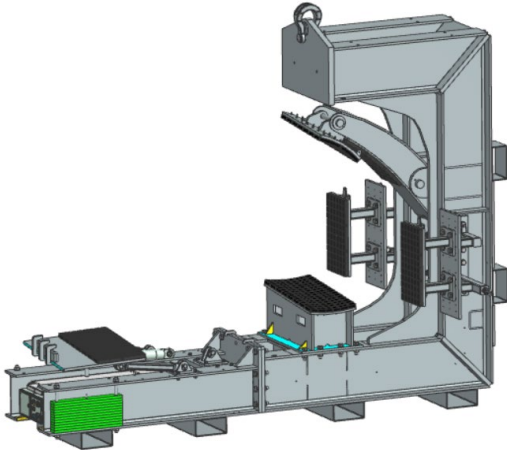
Write the designation and serial number of the used calibrated tool in the table below. When using a calibrated tool, write the position number or set number of the calibrated tool (1-10) in the corresponding field in the checklist.

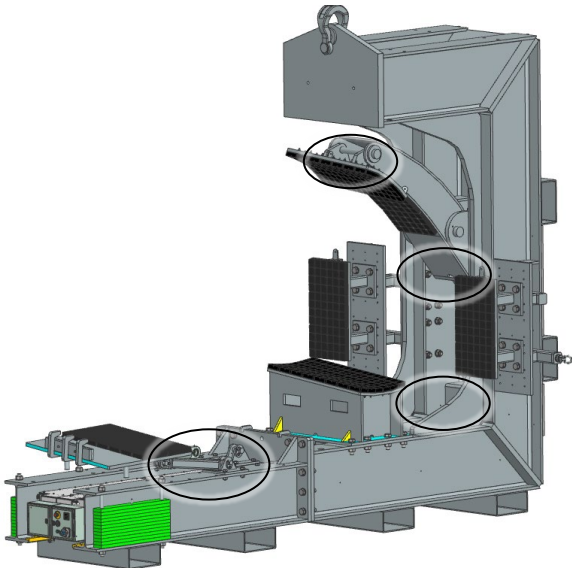

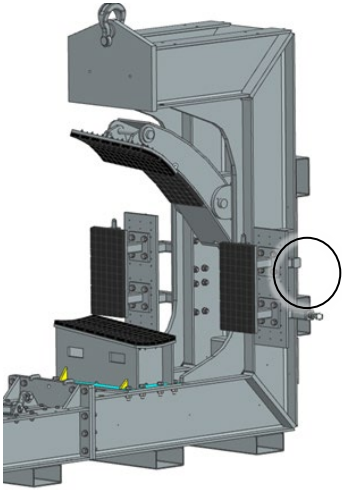
When hydraulic torque and tension tools are used, make sure to enter the serial numbers of all items including hydraulic pump, pressure gauge, and torque and tension heads.

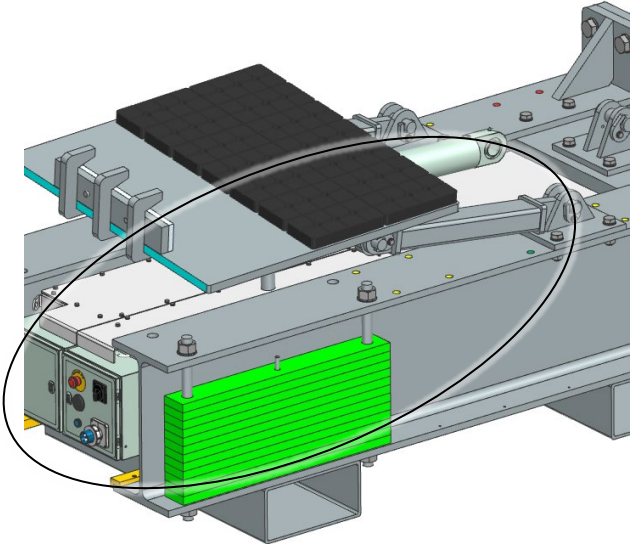
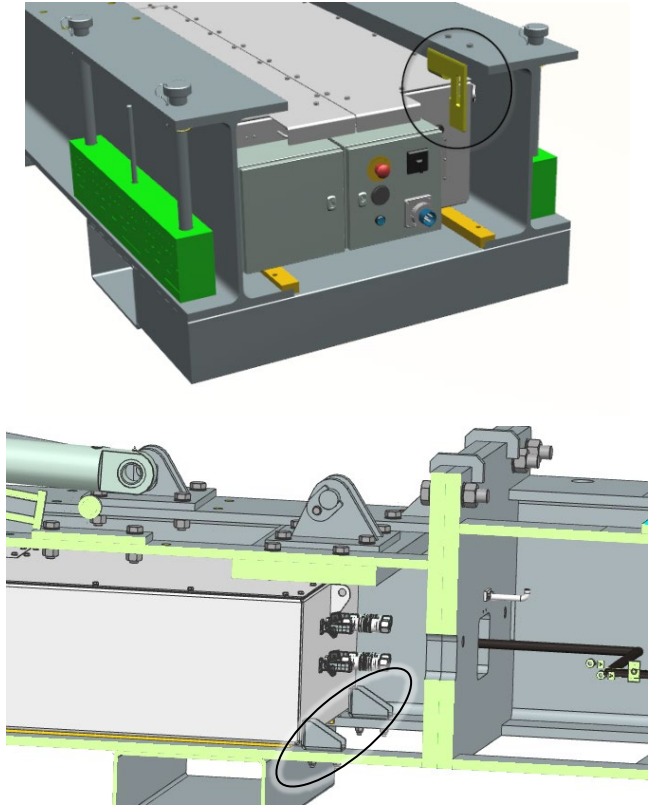
| | | | |
|---|---|---------------------|-----------------------|
|  | Calibration is valid until the last day of the stated month or the exact date stated on the tool. | | |
| Calibrated tools | | | |
| Pos. no. | Description of calibrating tool | Calibrated tool No. | Expiry date (yyyy-mm) |
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |

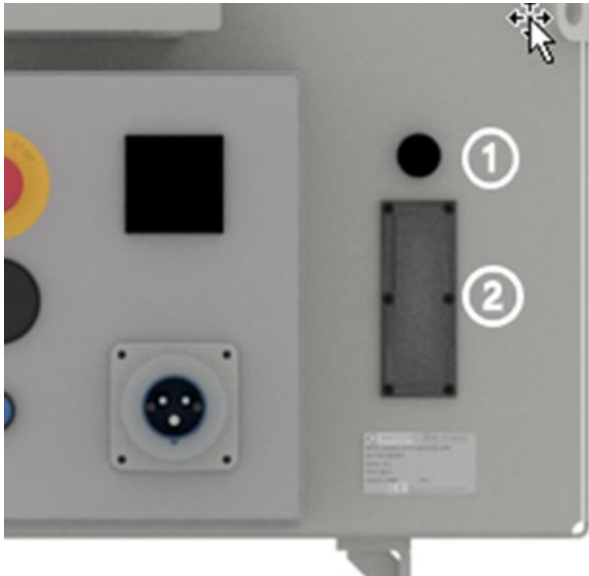
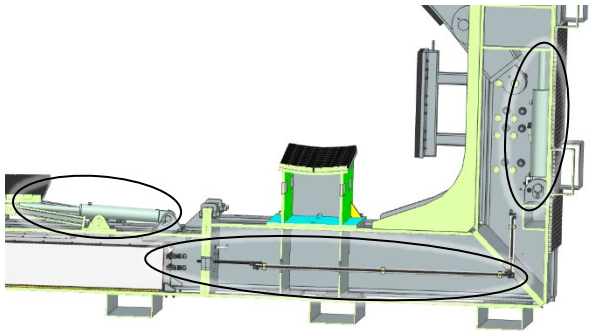
| | | | |
|---|---------------------------------|---------------------|-----------------------|
| Calibrated hydraulic tools (torque & tension) | | | |
| Set. no. | Description of calibrating tool | Calibrated tool No. | Expiry date (yyyy-mm) |
| 1A | Hydraulic pump | | |
| | Pressure gauge | | |
| | Torque and tension heads | | |
| 1B | Hydraulic pump | | |
| | Pressure gauge | | |
| | Torque and tension heads | | |
| 1C | Hydraulic pump | | |
| | Pressure gauge | | |
| | Torque and tension heads | | |

3. Inspection

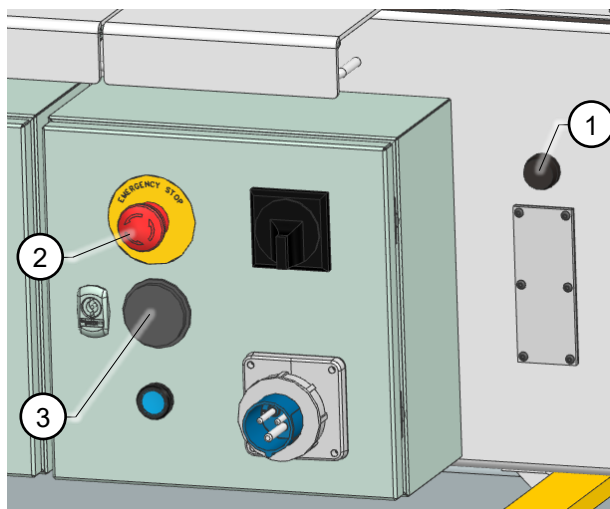
| Checks | | | |
|--------|--|------------------------------------|----------------------------|
| No. | Check item and specification | Calibrated tool pos. no/set no: | Date & Initials for OK: |
| 1 | <p>Nameplate identification:</p> <p>TR _____</p> <div></div> | | |
| 2 | <p>Check: General structure for damage and cracks.</p> <p>Welding for cracks. <input type="checkbox"/></p> <p>Lifting eyes for cracks. <input type="checkbox"/></p> <p>Damage to surfaces. <input type="checkbox"/></p> <div></div> | | |

| | | | |
|---|---|--|--|
| 3 | <p>Check:</p> <p>Axles and connections.</p> <div><input type="checkbox"/></div>  | | |
| 4 | <p>Check:</p> <p>Check that the tagline points are securely fastened. <input type="checkbox"/></p> <p>Check if spot welds are intact. If there are no spot welds, then tagline point must be snug tight. <input type="checkbox"/></p> <div></div> | | |

| | | | |
|---|--|--|--|
| 5 | <div>Check: HPU condition.</div> <div><input type="checkbox"/></div> <div></div> | | |
| 6 | <div>Check: The fixation of the HPU to the I-beams.</div> <div>1 end is secured with a bracket <input type="checkbox"/></div> <div>Another with pins <input type="checkbox"/></div> <div></div> | | |

| | | | |
|---|---|--|--|
| 7 | <p>Check: Oil level.</p> <p>To check the oil level, ensure that both cylinders are retracted. The operator needs to push the button (1) to turn on the light inside the cabinet, so it is possible to see through the oil level screen (2).</p> <p>Type of Motor oil: Castrol Hyspin AWH-M 32.</p> <p>Was any oil needed? Yes <input type="checkbox"/> No <input type="checkbox"/></p>  | | |
| 8 | <p>Check: Leakages on the system and cylinder.</p> <p>Were any leakages found? Yes <input type="checkbox"/> No <input type="checkbox"/></p>  | | |

| | | | |
|---|---|--|--|
| 9 | <p>Check: Battery capacity.</p> <p>Switch on the control unit (1)</p> <p>The emergency stop (2) needs to be pulled out.</p> <p>Battery capacity can be read on the Battery capacity gauge & h-m (3)</p> | | |
|---|---|--|--|



4. Remarks

Type comments here:

5. Photos

Insert photos here:

| | |
|--|--|
| | |
| | |
| | |

Below, all consumables such as rags, cables ties, cleaner, bolts are to be listed.

If spare parts are used, such as service kit for generator, gears, motors, and so on, these items are to be listed.

[illegible]

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| | |
|----------------------------------|---------------------|
| Competent technician / Team lead | |
| | |
| Name: _____ | Employee no.: _____ |
| | |
| Department: _____ | Company: _____ |
| | |
| Signature: _____ | Date: _____ |
| | |
| Installation Lead / Group lead | |
| | |
| Name: _____ | Employee no.: _____ |
| | |
| Department: _____ | Company: _____ |
| | |
| Signature: _____ | Date: _____ |
| | |