

# ZCH\_Rigging C-yoke and Inspection of Root

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



## ZCH\_Rigging C-yoke and Inspection of Root

Document ID and revision	Status	Date (yyyy-mm-dd)	Language
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

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.

#### D4470651/003- Confidential



## 3.1 Check: Rigging C-yoke

Chec	ks		
No.	Check item and specification	Calibrated tool pos. no/set no:	Date & Initials for OK:
1	Check the shackle for wear and tear.		
	Approval date:		
	Anything to report: Yes No		
2	Check the sling for wear and tear, dirt, ice, or snow.		
	Approval date:		
	Anything to report: Yes No		



### 3.2. Inspection of the root end

Chec	ks		
No.	Check item and specification	Calibrated tool pos. no/set no:	Date & Initials for OK:
1	Nameplate identification: TR  Lifting Yoke 980T Type Manufacturer Serial No Hardware No. Month / Yore No. Mo		
2	Check: Spreader beam  Welding for cracks.  Lifting eyes for cracks.  Damage to surfaces.		
3	Check: Bolted connection in spreader beam.  Damage or cracks in bolts.  Correct pretension according to assembly instruction.		



## 3.3. Check: Rigging – root end

Chec	ks		
No.	Check item and specification	Calibrated tool pos. no/set no:	Date & Initials for OK:
1	Check the shackles for wear and tear.		
	Approval date:		
	Anything to report: Yes No		



Check the slings for wear and	tear, dirt, ice, or snow.		
Approval date:			
Anything to report:	Yes	No 🗌	



3	Check the chains for wear and tear.		
	Approval date:	<del></del>	
	Anything to report:	Yes No	





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			



#### 4. Remarks

Type comments here:			



#### 5. Photos

Insert photos here:				
		1		
		1		



### 6. Consumables and spare parts

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.

Quantity	Item description	A9B ref. (if available)

### 7. Signatures



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