

**Inspection Report:** 

Order number: 42148172

Job Number: 200 Sold-To Name: EYHURST COURT LTD

SITE INFORMATION

**Customer Name:** 

Material: **SARA 3000 EU 1M2B** Serial number: STLA0804G272

Street: **BRAMLEY** City: **GUILDFORD Asset Tag:** Post Code:

**BIRTLEY HOUSE** 

GU5 0LB **Product Classification:** Fair

**Latest Location:** 1st Flr Magnolia room

**WORK ORDER INFORMATION** 

Order activity type: M Maintenance **Site Contact:** 

**Work Order Description:** Service Mainteance Visit

**Customer PO:** KA/16012 **CONTACT INFORMATION** 

Site Contact Email:

PRODUCT INFORMATION

**BIRTLEY HOUSE** 

## PROBLEM DESCRIPTION AND CORRECTIVE ACTION

Damage	Problem Description	Engineers Comments
Activity	Specification	Engineers Comments

#### **GENERAL INFORMATION**

External notes	
Annual service completed. Replaced split handgrip.	

## **PARTS USED**

Product Code	Product Description	Qty	Account Indicator
HMX570	HANDGRIP BLACK LIFTING ARM	1 EA	Bronze Contract

# LABOUR DETAILS

Activity Type	Start Date And Time	End Date And Time	Account Indicator
WORK	26.01.2018 09:30 AM	26.01.2018 12:00 PM	CONTRACT



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Sold-To Name: EYHURST COURT LTD

# THOROUGH EXAMINATION LIFT

SITE INFORMATION

Account Name: EYHURST COURT LTD
Customer Name: BIRTLEY HOUSE
Street: BRAMLEY
Post Code: GU5 0LB

Product and job information

Material: SARA 3000 EU 1M2B Serial number: STLA0804G272

Asset Tag:

Product Classification: Fair Date of Manufacture (if 2008/

known):

Latest Location: 1st Flr Magnolia room

Order number: 42148172

Inspection Plan: 00028487/01/00000001

 Date of Test:
 20180126

 Customer PO:
 20170210

# **Examination Details**

EXAMINATION DETAILS			
Safe working Load(s) (kg)	200	Accepted	
	(No remarks)		
	Test Equipment	n/a	
Date of Last Thorough Examination	PASS		
	12/16		
Date of Thorough Examination	PASS		
	1/18		
Date of Next Thorough Examination	PASS		
	1/19		
Is this the first examination?	No		
	(No remarks)		
If yes,assembled&installed correctly?	Yes		
	(No remarks)		
Examination interval?	Within 12 months		
	(No remarks)		
Any defects identified?	No		
	(No remarks)		
Is the defect of immediate danger?	No		
	(No remarks)		
Date when defect could become a danger?	PASS		
	(No remarks)		
Details of remedy required ?	No		
	(No remarks)		
Details of tests carried out?	Yes		
	(No remarks)		



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Is the equipment safe to operate?	Yes
	(No remarks)

# Technician's signature N Prosser

Email:

Customer's signature See summary report

Email:

Maintenance@birtleyhouse.co.uk tim@birtleyhouse.co.uk