



Development Member



GA1

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|--------------|
| Fleet number |
| H292 |
| Registration |
| N/A |
| Expiry |
| 16/12/26 |

REPORT OF THOROUGH EXAMINATION

This report complies with the requirements of the Lifting Operations and Lifting Equipment Regulations 1998 and Puer Regulations 1998

| | | |
|--|-----------------------|--|
| Date of Thorough Examination | Date of report | Report number |
| 17/12/25 | 17/12/25 | 12M251943 |
| Name and address of employer for whom the thorough examination was made | | Address of premises at which the examination was made |
| MJ Hickey Plant Hire, Unit 11, CBC Bristol Way, Slough, SL1 3TD | | Engineering Mews, 47 Heritage Walk, Slough, SL1 3GP |

Description and identification of equipment

| | | | |
|----------------------------|---------------------------|------------------------------|------------|
| Equipment type | Hitachi ZX48U-6 Excavator | Quick hitch type | Hill Tefra |
| ID / Serial Number | HCMAEP50P00051718 | Quick hitch ID | No I.D. |
| Date of manufacture | 2025 | Last examination date | 15/01/25 |

Safe working load (s):

| | |
|---|--|
| N/A | |
| For all duties refer to the Manufacturers lifting charts | |
| 1. SWL of the Lifting Points (e.g on hitch) must be greater than the maximum lift weight detailed on the duty chart | |
| 2. The weight of any hitch or attachment must be taken into account as it is not included in the manufacturer's duty charts | |
| N/A | |
| N/A | |

| | | |
|--|-----|----|
| Is the first examination after installation or assembly at a new site or location ? | Yes | No |
| If the answer to the above is Yes has the equipment been installed correctly ? | Yes | No |

Was the examination carried out :

| | | |
|--|-----|----|
| Within an interval of 12months or 6months ? | 12m | 6m |
| In accordance with an examination scheme ? | Yes | No |
| After the occurrence of exceptional circumstances ? | Yes | No |

Identification of any part found to have a defect which is or could become a danger to persons and a description of the defect: (If none state NONE)

None

| | | |
|--|-----|----|
| Is the above an existing or imminent danger to persons ? | Yes | No |
| Is the above a defect which is not yet but could become a danger to persons ? | Yes | No |

Particulars of any repair, renewal or alteration required to remedy the defect found above:

No alterations required

Particulars of any test carried out as part of the examination: (if none state NONE)


None

Observations / additional comments relative to this thorough examination:

Asset in good safe working order

| | | |
|--|-----|----|
| Is this equipment safe to operate ? | Yes | No |
|--|-----|----|

Name & Qualifications of person making this report: James Walsh. City&Guilds. CITB

Name of person signing or authenticating this report


Latest date by which next thorough examination must be carried out: 16/12/26

Name and address of employer of persons making and authenticating this report:

Walsh Machinery LTD, 2 Stiven crescent, Harrow, Middlesex, HA2 9AY