



<b>AUTHORIZED DEALER NAME and ADDRESS:</b>		<b>USER/OWNER NAME and ADDRESS:</b>	
<b>NAME of QUALIFIED TECHNICIAN:</b>	<b>MOTORIZED UNIT MODEL and SERIAL NUMBER:</b>	<b>DATE of INSPECTION:</b>	



Each Hydro Mobile motorized unit and its accessories must be submitted to an annual inspection. Use the spaces below to monitor inspections that need to be performed every year. Use the Notes and Comments form to indicate any discrepancy or any item found to be not acceptable. Any discrepancy must be reported and appropriate corrective action must be taken immediately. Corrective actions must be performed by a qualified technician. "Qualified" means a person who, by possession of a recognized degree, certificate or professional standing, or who by extensive knowledge, training and experience, has successfully demonstrated the ability to solve or resolve problems relating to the subject matter, the work or the project. Only a qualified person on the specific make and model of the Hydro Mobile equipment is allowed to perform maintenance inspections and repairs on Hydro Mobile units according to the guidelines, instructions, warnings and methods set out in the owner's manuals and Hydro Mobile training courses.

It is recommended to use replacement parts manufactured by or recommended by Hydro Mobile. The use of substitution parts could not only void the warranty covering this motorized unit and its components but cause serious damages that could lead to injury or death. It is recommended to replenish and grease components only with fluids and lubricants recommended by Hydro Mobile.

**Annual inspections must be performed by a qualified technician (see above).**

USE CHECK MARK FOR EACH ENTRY VERIFIED. IF NECESSARY, TAKE CORRECTIVE ACTION BEFORE INSERTING CHECK MARK.		OK	CORRECTED	N/A
<b>ACCESS and SAFETY</b>		<b>SERIAL NUMBER (if applicable):</b>		
1	A legible copy of the Owner's manual is present in the toolbox.			
<b>BASE</b>		<b>SERIAL NUMBER (if applicable):</b>		
2	Inspect jack gears and mechanism (4x or 8x, as applicable). Grease jack mechanism, if necessary.			
3	Inspect pedestal extension structure for any welding defects, damaged parts and excessive rust or corrosion (LEFT).			
4	Inspect pedestal extension structure for any welding defects, damaged parts and excessive rust or corrosion (RIGHT).			
5	Inspect pedestal structure for any welding defects, damaged parts and excessive rust or corrosion.			
6	Inspect rubber buffers on the base. Replace if damaged.			
7	Inspect trigger for bottom limit and trigger for bottom final limit.			
<b>MAIN FRAME</b>		<b>SERIAL NUMBER (if applicable):</b>		
8	Inspect integrity of main frame access door and locking mechanism.			
9	Inspect main frame structure for any welding defects, damaged parts and excessive rust or corrosion.			
<b>POWER TRAIN</b>		<b>SERIAL NUMBER (if applicable):</b>		
10	Check adjustment of rack safety stopper as per technical procedure.			
11	Check all gears for alignment and excessive wear as per technical procedure.			
12	Check bearings, shafts and retaining rings.			
13	Check gear box oil level as per technical procedure. Replenish, if necessary, with gear box oil recommended by Hydro Mobile. If over 2000 hours since last oil change (or after 500 hours for the break-in period), replace oil with gear box oil recommended by Hydro Mobile.			
14	Check idlers and bearings.			
15	Clean open gear grease from gears.			
16	Inspect air gap and condition of brakes on lower motor as per technical procedure.			
17	Inspect air gap and condition of brakes on upper motor as per technical procedure.			
18	Inspect all rollers for alignment and excessive wear.			
19	Inspect breather vent on gear box.			
20	Inspect centrifugal brake on lower motor / gear box as per technical procedure.			
21	Inspect centrifugal brake on upper motor / gear box as per technical procedure.			
22	Inspect electrical wiring to and from motors and brakes.			
23	Inspect gear box for any leaks or signs of wear.			
24	Inspect power train structure for any welding defects, damaged parts and excessive rust or corrosion.			



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	OK	CORRECTED	N/A
<b>MAIN TROLLEY STANDARD</b>	<b>SERIAL NUMBER (if applicable):</b>		
25 Check bearings, shafts and retaining rings.			
26 Check electrical connection to the control panel.			
27 Check hardware and connection points to main frame.			
28 Check skate rollers and make sure they pivot on the shaft.			
29 Inspect all four (4) tie points (D-rings) on the main trolley.			
30 Inspect all rollers for alignment and excessive wear.			
31 Inspect electrical wiring and connection to all sensors and connectors.			
32 Inspect main trolley structure for any welding defects, damaged parts and excessive rust or corrosion.			
<b>CONTROL PANEL</b>	<b>SERIAL NUMBER (if applicable):</b>		
33 Check control panel switches and display screen.			
34 Check electrical connections inside the control panel.			
35 Control pendant (if present and used) has been inspected. Pendant shows no signs of damage and is working properly.			
36 Inspect electrical cord and connection port.			
<b>GENERAL</b>	<b>SERIAL NUMBER (if applicable):</b>		
37 Check all stickers and make sure they are in place and legible. Replace or update stickers as required. Update the appropriate inspection validation sticker.			
38 Check condition of mast guard panels.			
39 Check outriggers, outrigger lock bolts and plank stop pins for damages.			
40 Inspect 27" (69 cm) guardrails (2x) for any welding defects, damaged parts or excessive rust or corrosion [28" (71 cm) guardrail on older unit models].			
41 Inspect 30" (76 cm) guardrails (2x) for any welding defects, damaged parts or excessive rust or corrosion.			
42 Inspect 60" (1,5 m) guardrails (2x) for any welding defects, damaged parts or excessive rust or corrosion.			
43 Inspect access stairs, ramps and extension for any welding defects, damaged parts and excessive rust or corrosion.			
44 Inspect door guardrail for any welding defects, damaged parts and excessive rust or corrosion.			
45 Inspect plank-end guardrails for any welding defects, damaged parts or excessive rust or corrosion.			
<b>TESTS to RUN (as per technical procedures)</b>	<b>SERIAL NUMBER (if applicable):</b>		
46 Check operation of horn when unit is going down.			
47 Check operation of strobe light.			
48 On a bearing bridge installation, test adjustment of emergency descent feedback cable.			
49 Perform brake capacity test as per technical procedure HMT-0230-00.			
50 Perform test of emergency descent system as per technical procedure.			
51 Perform travel test with a load equivalent to 2000 lb (907 kg) per side and validate current draw as per technical procedure.			
52 Perform travel test with a load equivalent to 4000 lb (1814 kg) per side and validate current draw as per technical procedure.			
53 Perform travel test without any loads and validate current draw as per technical procedure.			
54 Test 10' (3 m) stop sensor (transport platform installations only).			
55 Test bottom final limit sensor BFL.			
56 Test bottom limit sensor BL.			



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TESTS to RUN (as per technical procedures)	SERIAL NUMBER (if applicable):			
57 Test door port sensor 1.				
58 Test door port sensor 2.				
59 Test emergency stop button.				
60 Test inclinometer 1 +2.0 deg. sensor.				
61 Test inclinometer 1 -2.0 deg. sensor.				
62 Test inclinometer 2 +2.0 deg. sensor.				
63 Test inclinometer 2 -2.0 deg. sensor.				
64 Test phase loss detector.				
65 Test phase synchronization.				
66 Test the control pendant (if present and used) as per technical procedure.				
67 Test top final limit sensor TFL.				
68 Test top limit sensor TL.				

The undersigned certifies that this unit and its accessories have been properly inspected, in due time, that any discrepancy has been brought to the attention of the owner/user and that all discrepancies have been corrected prior to further use of this unit or its accessories.

<b>Signature of QUALIFIED TECHNICIAN</b> <small>S_MAINTANNUAL_1121 05 Nov 21</small>	<b>Name of QUALIFIED TECHNICIAN (IN PRINT)</b> <small>R05</small>	<b>DATE OF INSPECTION</b> <small>Page 3 of 3 HM-FO-0908</small>
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NAME of QUALIFIED TECHNICIAN:	MOTORIZED UNIT MODEL and SERIAL NUMBER:	DATE of INSPECTION:

DATE ENTERED	NOTE or COMMENT	CORRECTIVE ACTION REQUIRED	DATE OF REPORT TO OWNER/USER	DATE OF COMPLETION FOR CORRECTIVE ACTION

The undersigned certifies that this unit and its accessories have been properly inspected, in due time, that any discrepancy has been brought to the attention of the owner/user and that all discrepancies have been corrected prior to further use of this unit or its accessories.

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