

REPORT THOROUGH EXAMINATION OF LIFTING EQUIPMENT

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

Date of Examination: 08/01/2026	Date of Report: 09/01/2026	Report No: QU-0056	
Name & address of employer for whom the thorough examination was made: QUIGLEY CRANE SERVICES LTD 211 SEACOAST ROAD LIMAVADY CO. L/DERRY		Address of premises at which the examination was made: QUIGLEY CRANE SERVICES LTD 211 SEACOAST ROAD LIMAVADY CO. L/DERRY	
Description and identification of the equipment:	Safe working load(s)	Date of manufacture (If known)	
MAKE - LIEBHERR MODEL - LTM1150-5.3 MOBILE ALL TERRAIN CRANE SER.NO - 079379 REG.NO - CYZ 1797	Refer to Load chart	2023	
		Date of last thorough examination 09/01/2025	
Is this the first examination after installation or assembly at a new site or location?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? Within an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?	
If the answer to the above question is YES has the equipment been installed correctly?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
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 a defect which is immediate danger to persons? *Note - This is a reportable defect	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Is the above a defect which is immediate danger to persons? (If YES state the by when)	YES by:		
Particulars of any repair, renewal or alteration required to remedy the defect identified above:			
NONE			
Particulars of any tests carried out as part of the examination: (If none state NONE)			
Inspection of rope & pulleys, limits verified through functional test.			
Observations / additional comments relative to this thorough examination			
NONE			
IS THIS EQUIPMENT SAFE TO OPERATE?		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Name & Qualifications of person making this report: <i>Ryan Mooney</i> LEEA Qualified Competent Examiner	Name of person authenticating this report: Signed: <i>Ryan Mooney</i>	Latest date when examination must be carried out: 08/01/2027	
Name and address of employer of persons making and authenticating this report: RPM Lifting Solutions Ltd Unit 9, Lynwood Business Centre, Courtauld Way, Campsie, Co. L/Derry, BT47 3XX			