

<b>RTR Services Inc. GENERAL EQUIPMENT CONDITION REPORT</b>		<b>RTR #:</b> 3091427	
		<b>ACCOUNT</b>	
		<b>ACCOUNT NAME:</b>	
<b>YEAR:</b>	2021		
<b>MAKE:</b>	Reinert	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	EQUIPMENT WAS IN USE AT THE TIME OF RECOVERY
<b>MODEL:</b>	XR536 74HP	<input type="checkbox"/> OPERATIONAL	
<b>SN:</b>	5360821146	<input checked="" type="checkbox"/> NON OPERATIONAL	
<b>POWER:</b>	Diesel	<input type="checkbox"/> UNTESTABLE	
<b>DESCRIPTION:</b>	Reinert S-Tube Concrete Pump		
<b>SHOT / COUNT / HOUR:</b> 1,051			
<b>NOTES / COMMENTS:</b> Dead Battery. No Radio remote for the unit. Tire size 225/75/R15. Reported hydraulic issues that may need repairs.			

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<b>MAKE:</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO	EQUIPMENT WAS IN USE AT THE TIME OF RECOVERY
<b>MODEL:</b>		<input type="checkbox"/> OPERATIONAL	
<b>SN:</b>		<input type="checkbox"/> NON OPERATIONAL	
<b>POWER:</b>		<input type="checkbox"/> UNTESTABLE	
<b>DESCRIPTION:</b>			
<b>SHOT / COUNT / HOUR:</b>			
<b>NOTES / COMMENTS:</b>			

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<b>DESCRIPTION:</b>			
<b>SHOT / COUNT / HOUR:</b>			
<b>NOTES / COMMENTS:</b>			

11/1/2023

_____ EMPLOYEE'S FULL NAME (PLEASE PRINT)	_____ DATE	_____ EMPLOYEE'S SIGNATURE
By signature above I do hereby certify all information contained within this report to be true and accurate to the best of my knowledge at present.		

**RTR Services Inc. • 2747 Pence Loop SE Salem OR 97302 • 1.800.238.3294 • FAX 503.399.0421**

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