

RTR Services Inc. GENERAL EQUIPMENT CONDITION REPORT		RTR #:		8123056-03
		ACCOUNT		
		ACCOUNT NAME:		
YEAR:	2011			
MAKE:	Skyjack	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	EQUIPMENT WAS IN USE AT THE TIME OF RECOVERY	
MODEL:	SJIII3219	<input type="checkbox"/> OPERATIONAL		
SN:	22023753	<input checked="" type="checkbox"/> NON OPERATIONAL		
POWER:	Battery Dead / No	<input checked="" type="checkbox"/> UNTESTABLE		
DESCRIPTION:	Skylift SJIII3219 verified with serial 22023753			
SHOT / COUNT / HOUR: No visual hour meter instrument panel.				
NOTES / COMMENTS: Control plug wiring exposed and missing small area of installation casing. All tires are missing chunks.				

RTR Services Inc. GENERAL EQUIPMENT CONDITION REPORT		RTR #:		8123056-04
		ACCOUNT		
		ACCOUNT NAME:		
YEAR:	2011			
MAKE:	Skyjack	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	EQUIPMENT WAS IN USE AT THE TIME OF RECOVERY	
MODEL:	SJIII3219	<input checked="" type="checkbox"/> OPERATIONAL		
SN:	22025574	<input type="checkbox"/> NON OPERATIONAL		
POWER:		<input type="checkbox"/> UNTESTABLE		
DESCRIPTION:	Skylift SJIII3219 verified with serial 22025574			
SHOT / COUNT / HOUR: No visual hour meter instrument panel.				
NOTES / COMMENTS: Control plug wiring exposed and missing small area of installation casing. All tires are missing chunks.				

RTR Services Inc. GENERAL EQUIPMENT CONDITION REPORT		RTR #:		
		ACCOUNT		
		ACCOUNT NAME:		
YEAR:				
MAKE:		<input type="checkbox"/> YES <input type="checkbox"/> NO	EQUIPMENT WAS IN USE AT THE TIME OF RECOVERY	
MODEL:		<input type="checkbox"/> OPERATIONAL		
SN:		<input type="checkbox"/> NON OPERATIONAL		
POWER:		<input type="checkbox"/> UNTESTABLE		
DESCRIPTION:				
SHOT / COUNT / HOUR:				
NOTES / COMMENTS:				

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. • 395 Market St. NE Salem OR 97301 • 1.800.238.3294 • FAX 503.399.0421

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