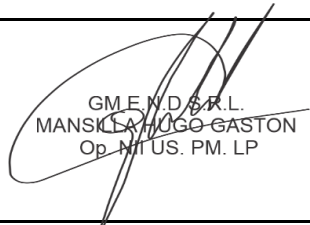


|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     | INFORME DE I.N.D                    |                      |                                                                                      | <b>Nº 12.553</b><br>HOJA 1 de 2 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|----------------------|--------------------------------------------------------------------------------------|---------------------------------|------|---------------------------------------------------|--------------------|--------------------------|-------------------|-------------------------------------|----------------------------|-----------|-------------------------------------|-----------|--------------------------|----------------------------|-------|--------------------------|----------|-------------------------------------|-------------------------|-----------|--------------------------|----------|-------------------------------------|------------------|--------|-----------|-----------|-----------|-----------------|-----------|-------|----------|----------|---------------------|---------|-------|----------|----------|----------------|------------|-----------------|--------|--------|-------------|-----|-------|----------|----------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     | PORTAVOLQUETE                       |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| PROCEDIMIENTO: <b>PO 01</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> | CLIENTE: <b>VIENTOS EL SUR SRL</b>  | FECHA:               | 07                                                                                   | 07                              | 2022 |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| PRÁCTICA DEL CLIENTE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/>            | EQUIPO: N/A                         | LUGAR DE INSPECCIÓN: | <b>BASE GM END S.R.L.</b>                                                            |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| MARCA: <b>FORD</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | MODELO: <b>1723</b>                 | DOMINIO: <b>AB-754-XF</b>           |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Nº PARTE: <b>2048</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | IDENT Nº: <b>722</b>                | VIGENCIA: <b>12 MESES</b>           |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| <table style="width: 100%;"> <tr> <td>Inspección a metal limpio:</td> <td>Arenado</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Limpieza Mecánica</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Condiciones de Inspección:</td> <td>Desarmado</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Armado</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Inspección con partículas:</td> <td>Secas</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Humedas</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Condiciones de Entrega:</td> <td>Desarmado</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Armado</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>                                                                                                                                                                             |                                     |                                     |                      |                                                                                      |                                 |      | Inspección a metal limpio:                        | Arenado            | <input type="checkbox"/> | Limpieza Mecánica | <input checked="" type="checkbox"/> | Condiciones de Inspección: | Desarmado | <input checked="" type="checkbox"/> | Armado    | <input type="checkbox"/> | Inspección con partículas: | Secas | <input type="checkbox"/> | Humedas  | <input checked="" type="checkbox"/> | Condiciones de Entrega: | Desarmado | <input type="checkbox"/> | Armado   | <input checked="" type="checkbox"/> |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Inspección a metal limpio:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Arenado                             | <input type="checkbox"/>            | Limpieza Mecánica    | <input checked="" type="checkbox"/>                                                  |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Condiciones de Inspección:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Desarmado                           | <input checked="" type="checkbox"/> | Armado               | <input type="checkbox"/>                                                             |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Inspección con partículas:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Secas                               | <input type="checkbox"/>            | Humedas              | <input checked="" type="checkbox"/>                                                  |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Condiciones de Entrega:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Desarmado                           | <input type="checkbox"/>            | Armado               | <input checked="" type="checkbox"/>                                                  |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>EQUIPO UTILIZADO</th> <th>Nº DE SERIE / LOTE</th> <th>Nº DE CERTIFICADO</th> <th>F. CALIBRACIÓN</th> <th>F. DE VENCIMIENTO</th> </tr> </thead> <tbody> <tr> <td>LÁMPARA UV</td> <td>9078</td> <td>END 224-10</td> <td>30/8/2010</td> <td>VER INT. UV</td> </tr> <tr> <td>YUGO</td> <td>0586</td> <td>5864</td> <td>8/9/2021</td> <td>8/9/2022</td> </tr> <tr> <td>BOBINA AC-DC</td> <td>17052908</td> <td>06299</td> <td>8/5/2020</td> <td>8/5/2025</td> </tr> <tr> <td>MEDIDOR DE CAMPO</td> <td>GM 064</td> <td>NO APLICA</td> <td>NO APLICA</td> <td>NO APLICA</td> </tr> <tr> <td>MED. INT. LUZ V</td> <td>070801317</td> <td>06301</td> <td>8/3/2021</td> <td>3/8/2022</td> </tr> <tr> <td>MEDIDOR INT. LUZ UV</td> <td>AC49723</td> <td>06302</td> <td>8/3/2021</td> <td>3/8/2022</td> </tr> <tr> <td>PARTICULAS S/H</td> <td>1701005785</td> <td>049552000190002</td> <td>sep-21</td> <td>sep-22</td> </tr> <tr> <td>MASA PATRON</td> <td>864</td> <td>06303</td> <td>8/5/2020</td> <td>8/5/2025</td> </tr> </tbody> </table> |                                     |                                     |                      |                                                                                      |                                 |      | EQUIPO UTILIZADO                                  | Nº DE SERIE / LOTE | Nº DE CERTIFICADO        | F. CALIBRACIÓN    | F. DE VENCIMIENTO                   | LÁMPARA UV                 | 9078      | END 224-10                          | 30/8/2010 | VER INT. UV              | YUGO                       | 0586  | 5864                     | 8/9/2021 | 8/9/2022                            | BOBINA AC-DC            | 17052908  | 06299                    | 8/5/2020 | 8/5/2025                            | MEDIDOR DE CAMPO | GM 064 | NO APLICA | NO APLICA | NO APLICA | MED. INT. LUZ V | 070801317 | 06301 | 8/3/2021 | 3/8/2022 | MEDIDOR INT. LUZ UV | AC49723 | 06302 | 8/3/2021 | 3/8/2022 | PARTICULAS S/H | 1701005785 | 049552000190002 | sep-21 | sep-22 | MASA PATRON | 864 | 06303 | 8/5/2020 | 8/5/2025 |
| EQUIPO UTILIZADO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Nº DE SERIE / LOTE                  | Nº DE CERTIFICADO                   | F. CALIBRACIÓN       | F. DE VENCIMIENTO                                                                    |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| LÁMPARA UV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 9078                                | END 224-10                          | 30/8/2010            | VER INT. UV                                                                          |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| YUGO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 0586                                | 5864                                | 8/9/2021             | 8/9/2022                                                                             |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| BOBINA AC-DC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 17052908                            | 06299                               | 8/5/2020             | 8/5/2025                                                                             |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| MEDIDOR DE CAMPO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | GM 064                              | NO APLICA                           | NO APLICA            | NO APLICA                                                                            |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| MED. INT. LUZ V                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 070801317                           | 06301                               | 8/3/2021             | 3/8/2022                                                                             |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| MEDIDOR INT. LUZ UV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | AC49723                             | 06302                               | 8/3/2021             | 3/8/2022                                                                             |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| PARTICULAS S/H                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1701005785                          | 049552000190002                     | sep-21               | sep-22                                                                               |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| MASA PATRON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 864                                 | 06303                               | 8/5/2020             | 8/5/2025                                                                             |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| DETALLE DE INSPECCIÓN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                     |                                     |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     | APTO                                | NO APTO              |  |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Detección de Fisuras                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     | X                                   |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Estado de Cadena                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     | X                                   |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Estado de Planchuela                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     | X                                   |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Estado de Anclaje                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     | X                                   |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Estado de Grampa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     | X                                   |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Estado de Soldadura                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     | X                                   |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Aprobación según procedimiento Nº PO 01 ASTM E709</td> <td style="width: 40%; text-align: center; color: red; font-weight: bold;">SI</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     |                                     |                      |                                                                                      |                                 |      | Aprobación según procedimiento Nº PO 01 ASTM E709 | SI                 |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| Aprobación según procedimiento Nº PO 01 ASTM E709                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | SI                                  |                                     |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| DETALLE DE TAREAS REALIZADAS - OBSERVACIONES - COMENTARIOS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                     |                                     |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| OBSERVACIONES: SE REPARAN SOLDADURA DE PTOS CRITICOS - OK                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     |                                     |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| <br>GM END S.R.L.<br>MANSILLA HUGO GASTON<br>Op. NTUS. PM. LP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     | PRECINTO Nº                         |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     | FECHA PUESTA EN VIGENCIA            |                      |                                                                                      |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |
| FIRMA OPERADOR GM END S.R.L.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                     | FIRMA CLIENTE - ACLARACIÓN          |                      | FIRMA - ACLARACIÓN                                                                   |                                 |      |                                                   |                    |                          |                   |                                     |                            |           |                                     |           |                          |                            |       |                          |          |                                     |                         |           |                          |          |                                     |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |        |        |             |     |       |          |          |

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# INFORME DE I.N.D

Nº 12.553

HOJA 2 de 2

## PORTAVOLQUETE

PROCEDIMIENTO: PO 01

☒

CLIENTE:

VIENTOS EL SUR SRL

FECHA

07

07

2022

PRÁCTICA DEL CLIENTE

☐

EQUIPO:

N/A

LUGAR DE INSPECCIÓN:

BASE GM END S.R.L.



GM E.N.D. S.R.L.  
MANSILLA HUGO GASTON  
Op. NIJUS. PM. LP

PRECINTO Nº

FECHA PUESTA EN VIGENCIA

FIRMA OPERADOR GM END S.R.L.

FIRMA CLIENTE - ACLARACIÓN

FIRMA - ACLARACIÓN

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