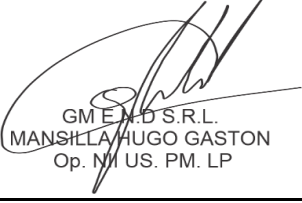


|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     | INFORME DE I.N.D                    |                                |                                     | <b>Nº 14.694</b><br>HOJA 1 de 2                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     | PORTAVOLQUETE                       |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| PROCEDIMIENTO: <b>PO 01</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     | <input checked="" type="checkbox"/> | CLIENTE: <b>MAXICON S.R.L.</b> |                                     | FECHA: 28 / 11 / 2023                          |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| PRÁCTICA DEL CLIENTE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     | <input type="checkbox"/>            | EQUIPO: <b>698</b>             |                                     | LUGAR DE INSPECCIÓN: <b>BASE GM END S.R.L.</b> |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| MARCA: <b>SCANIA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     | MODELO: <b>P310</b>                 |                                | DOMINIO: <b>AD 578 RO</b>           |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Nº PARTE: <b>2953</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     | IDENT Nº: <b>#698</b>               |                                | VIGENCIA: <b>12 MESES</b>           |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Inspección a metal limpio:</td> <td style="width: 33%;">Arenado</td> <td style="width: 10%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 33%;">Limpieza Mecánica</td> <td style="width: 10%; text-align: center;"><input 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 checked="" type="checkbox"/></td> <td>Húmedas</td> <td style="text-align: center;"><input 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 checked="" type="checkbox"/> | Limpieza Mecánica    | <input type="checkbox"/>            | Condiciones de Inspección: | Desarmado        | <input checked="" type="checkbox"/> | Armado                   | <input type="checkbox"/> | Inspección con partículas:          | Secas                    | <input checked="" type="checkbox"/> | Húmedas                             | <input type="checkbox"/> | Condiciones de Entrega: | Desarmado                           | <input type="checkbox"/> | Armado              | <input checked="" type="checkbox"/> |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Inspección a metal limpio:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Arenado                             | <input checked="" type="checkbox"/> | Limpieza Mecánica              | <input type="checkbox"/>            |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Condiciones de Inspección:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Desarmado                           | <input checked="" type="checkbox"/> | Armado                         | <input type="checkbox"/>            |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Inspección con partículas:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Secas                               | <input checked="" type="checkbox"/> | Húmedas                        | <input type="checkbox"/>            |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Condiciones de Entrega:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Desarmado                           | <input type="checkbox"/>            | Armado                         | <input checked="" type="checkbox"/> |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <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>9296</td> <td>NO APLICA</td> <td>CALIBRACIÓN INT.</td> <td>-</td> </tr> <tr> <td>YUGO</td> <td>303</td> <td>NO APLICA</td> <td>CALIBRACIÓN INT.</td> <td>-</td> </tr> <tr> <td>EQUIPO UT</td> <td>20200054198</td> <td>40562</td> <td>27/12/2022</td> <td>27/12/2023</td> </tr> <tr> <td>EQUIPO UT</td> <td>5020634</td> <td>45945</td> <td>31/07/2023</td> <td>31/07/2024</td> </tr> <tr> <td>BOBINA AC-DC</td> <td>17052908</td> <td>06299</td> <td>08/05/2020</td> <td>08/05/2025</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>40561</td> <td>27/12/2022</td> <td>27/12/2023</td> </tr> <tr> <td>MEDIDOR INT. LUZ UV</td> <td>AC 49723</td> <td>40560</td> <td>27/12/2022</td> <td>27/12/2023</td> </tr> <tr> <td>PARTICULAS S/H</td> <td>2101005648</td> <td>NO APLICA</td> <td>jun-2021</td> <td>jun-2026</td> </tr> <tr> <td>MASA PATRÓN</td> <td>864</td> <td>06303</td> <td>1/8/2023</td> <td>1/8/2024</td> </tr> </tbody> </table>                                                             |                                     |                                     |                                |                                     |                                                |  | EQUIPO UTILIZADO           | Nº DE SERIE / LOTE | Nº DE CERTIFICADO                   | F. CALIBRACIÓN       | F. DE VENCIMIENTO                   | LÁMPARA UV                 | 9296             | NO APLICA                           | CALIBRACIÓN INT.         | -                        | YUGO                                | 303                      | NO APLICA                           | CALIBRACIÓN INT.                    | -                        | EQUIPO UT               | 20200054198                         | 40562                    | 27/12/2022          | 27/12/2023                          | EQUIPO UT                | 5020634 | 45945 | 31/07/2023 | 31/07/2024 | BOBINA AC-DC | 17052908 | 06299 | 08/05/2020 | 08/05/2025 | MEDIDOR DE CAMPO | GM 064 | NO APLICA | NO APLICA | NO APLICA | MED. INT. LUZ V | 070801317 | 40561 | 27/12/2022 | 27/12/2023 | MEDIDOR INT. LUZ UV | AC 49723 | 40560 | 27/12/2022 | 27/12/2023 | PARTICULAS S/H | 2101005648 | NO APLICA | jun-2021 | jun-2026 | MASA PATRÓN | 864 | 06303 | 1/8/2023 | 1/8/2024 |
| EQUIPO UTILIZADO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Nº DE SERIE / LOTE                  | Nº DE CERTIFICADO                   | F. CALIBRACIÓN                 | F. DE VENCIMIENTO                   |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| LÁMPARA UV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 9296                                | NO APLICA                           | CALIBRACIÓN INT.               | -                                   |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| YUGO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 303                                 | NO APLICA                           | CALIBRACIÓN INT.               | -                                   |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| EQUIPO UT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 20200054198                         | 40562                               | 27/12/2022                     | 27/12/2023                          |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| EQUIPO UT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 5020634                             | 45945                               | 31/07/2023                     | 31/07/2024                          |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| BOBINA AC-DC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 17052908                            | 06299                               | 08/05/2020                     | 08/05/2025                          |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| MEDIDOR DE CAMPO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | GM 064                              | NO APLICA                           | NO APLICA                      | NO APLICA                           |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| MED. INT. LUZ V                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 070801317                           | 40561                               | 27/12/2022                     | 27/12/2023                          |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| MEDIDOR INT. LUZ UV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | AC 49723                            | 40560                               | 27/12/2022                     | 27/12/2023                          |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| PARTICULAS S/H                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 2101005648                          | NO APLICA                           | jun-2021                       | jun-2026                            |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| MASA PATRÓN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 864                                 | 06303                               | 1/8/2023                       | 1/8/2024                            |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| DETALLE DE INSPECCIÓN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     |                                     |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | APTO                                | NO APTO                             |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Detección de Fisuras                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Estado de Cadena                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Estado de Placas                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Estado de Anclaje                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Estado de Grampa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Estado de Soldadura                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Aprobación según procedimiento Nº PO 01 ASTM E709                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                     |                                     |                                |                                     | SI                                             |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| DETALLE DE TAREAS REALIZADAS - OBSERVACIONES - COMENTARIOS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                     |                                     |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                     |                                |                                     |                                                |  |                            |                    |                                     |                      |                                     |                            |                  |                                     |                          |                          |                                     |                          |                                     |                                     |                          |                         |                                     |                          |                     |                                     |                          |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| <br>GM E.N.D. S.R.L.<br>MANSILLA HUGO GASTON<br>Op. M US. PM. LP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                     |                                     |                                |                                     | PRECINTO Nº<br>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 14.694

HOJA 2 de 2

## PORTAVOLQUETE

PROCEDIMIENTO: PO 01

☒

CLIENTE: MAXICON S.R.L.

FECHA

28

11

2023

PRÁCTICA DEL CLIENTE

☐

EQUIPO: 698

LUGAR DE INSPECCIÓN:

BASE GM END SRL



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

PRECINTO Nº

FECHA PUESTA EN VIGENCIA

FIRMA OPERADOR GM END S.R.L.

FIRMA CLIENTE - ACLARACIÓN

FIRMA - ACLARACIÓN

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