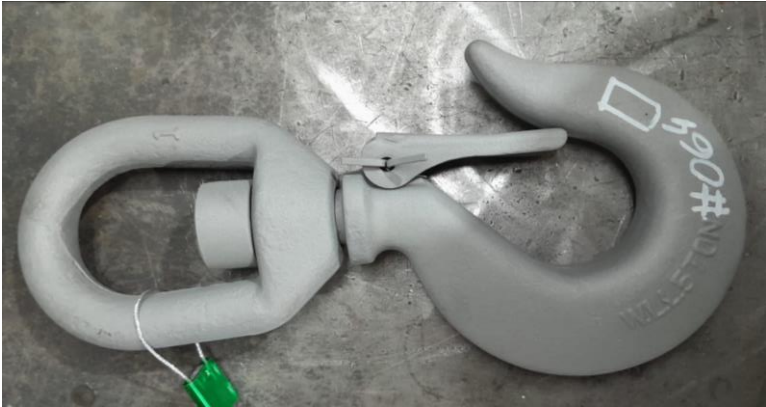
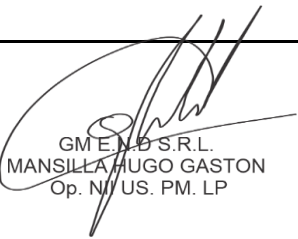


|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>INFORME DE I.N.D</b>                                                                                                                 |                                     |                      | <b>Nº 14.885</b><br>HOJA 1 de 1     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------------------|-------------------------------------|----|------|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------|--------------------------|----------------------------|-------------------------------------|--------------------------|-------------------|-------------------------------------|----------------------------|---------------------|-------------------------------------|------------------|--------------------------|-------------------------------------|-------------|--------------------------|-------------------------------------|-------------------------------------|-----------|---------|-------|------------|------------|--------------|----------|-------|------------|------------|------------------|--------|-----------|-----------|-----------|-----------------|-----------|-------|------------|------------|---------------------|----------|-------|------------|------------|----------------|------------|-----------|----------|----------|-------------|-----|-------|----------|----------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>GANCHO GIRATORIO</b>                                                                                                                 |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| PROCEDIMIENTO: <b>PO 01</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/>                                                                                                     | CLIENTE: <b>TRANSPORTE JMB</b>      | FECHA:               | 07                                  | 02 | 2024 |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| PRÁCTICA DEL CLIENTE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>                                                                                                                | INTERNO: <b>64</b>                  | LUGAR DE INSPECCIÓN: | <b>BASE GM END S.R.L.</b>           |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| MARCA: <b>NO POSEE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                         | DIAMETRO: <b>Ø 1"</b>               | CAPACIDAD:           | <b>5 TONELADAS</b>                  |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Nº PARTE: <b>-</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                         | IDENT Nº: <b>#064</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 type="checkbox"/></td> <td>Armado</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Inspección con partículas:</td> <td>Secas</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Humedas</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 type="checkbox"/> | Armado            | <input checked="" type="checkbox"/> | Inspección con partículas: | Secas               | <input checked="" type="checkbox"/> | Humedas          | <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 type="checkbox"/>            | Armado               | <input checked="" type="checkbox"/> |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Inspección con partículas:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Secas                                                                                                                                   | <input checked="" type="checkbox"/> | Humedas              | <input type="checkbox"/>            |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Condiciones de Entrega:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Desarmado                                                                                                                               | <input type="checkbox"/>            | Armado               | <input checked="" type="checkbox"/> |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <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                            |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| <b>DETALLE DE INSPECCIÓN</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                         |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;"></td> <td style="width: 10%; text-align: center;"> <table border="1" style="font-size: 0.7em;"> <tr> <td style="width: 50%;">APTO</td> <td style="width: 50%;">NO APTO</td> </tr> </table> </td> <td style="width: 55%;"></td> </tr> <tr> <td>Detección de Fisuras</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>Condición de Ojal</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>Condición de Cuerpo</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>Condición de Eje</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>Condición de Perno</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> </tr> </table> <div style="display: flex; justify-content: space-around; margin-top: 10px;">   </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;">  </div> |                                                                                                                                         |                                     |                      |                                     |    |      |                            | <table border="1" style="font-size: 0.7em;"> <tr> <td style="width: 50%;">APTO</td> <td style="width: 50%;">NO APTO</td> </tr> </table> | APTO                                | NO APTO           |                          | Detección de Fisuras       | <input checked="" type="checkbox"/> |                          | Condición de Ojal | <input checked="" type="checkbox"/> |                            | Condición de Cuerpo | <input checked="" type="checkbox"/> |                  | Condición de Eje         | <input checked="" type="checkbox"/> |             | Condición de Perno       | <input checked="" type="checkbox"/> |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <table border="1" style="font-size: 0.7em;"> <tr> <td style="width: 50%;">APTO</td> <td style="width: 50%;">NO APTO</td> </tr> </table> | APTO                                | NO APTO              |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| APTO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | NO APTO                                                                                                                                 |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Detección de Fisuras                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input checked="" type="checkbox"/>                                                                                                     |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Condición de Ojal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/>                                                                                                     |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Condición de Cuerpo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/>                                                                                                     |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Condición de Eje                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/>                                                                                                     |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Condición de Perno                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/>                                                                                                     |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| Aprobación según procedimiento Nº PO 01 ASTM E709                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                         |                                     | <b>SI</b>            |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| <b>DETALLE DE TAREAS REALIZADAS - OBSERVACIONES - COMENTARIOS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                         |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%;"> <br/>           GM E.N.D. S.R.L.<br/>           MANSILLA HUGO GASTON<br/>           Op. N° US. PM. LP         </div> <div style="width: 30%; border-top: 1px solid black;"></div> <div style="width: 35%; border-top: 1px solid black;"> <table style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <tr> <td style="width: 50%;">PRECINTO Nº</td> <td style="width: 50%; text-align: center;">007307</td> </tr> <tr> <td style="width: 50%;">FECHA PUESTA EN VIGENCIA</td> <td style="width: 50%;"></td> </tr> </table> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                         |                                     |                      |                                     |    |      | PRECINTO Nº                | 007307                                                                                                                                  | FECHA PUESTA EN VIGENCIA            |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| PRECINTO Nº                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 007307                                                                                                                                  |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| FECHA PUESTA EN VIGENCIA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                         |                                     |                      |                                     |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |
| FIRMA OPERADOR GM END S.R.L.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                         | FIRMA CLIENTE - ACLARACIÓN          |                      | FIRMA - ACLARACIÓN                  |    |      |                            |                                                                                                                                         |                                     |                   |                          |                            |                                     |                          |                   |                                     |                            |                     |                                     |                  |                          |                                     |             |                          |                                     |                                     |           |         |       |            |            |              |          |       |            |            |                  |        |           |           |           |                 |           |       |            |            |                     |          |       |            |            |                |            |           |          |          |             |     |       |          |          |

TIRSO LOPEZ Nº 636 - Bo INDUSTRIAL - COM. RIV. - CHUBUT - 9000 - CEL: (0297) 15-6256447 - EMAIL: mansilla.end@gmail.com