

FSG440 Portable Gantry



User Manual



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Introduction



Please read and understand this manual in its entirety before using your FSG440 Free-Standing Gantry. The information in this manual is important for the safety of anyone near the gantry and must be read and understood to help prevent injuries. It is also crucial to the proper operation and maintenance of the gantry.

This user manual should be kept safe for future reference. Contents of this manual are subject to change without prior written notice.

Should any questions arise from reviewing this manual, contact your local authorised representative.

If, during the use of this device a serious incident occurs, please report it to the manufacturer and to your national authority.

1.1 Intended Use

The portable free-standing gantry system is a great solution for situations where a permanent ceiling track cannot be installed. It is easy to set up and does not require any mounting on walls, ceilings, or the floor. The gantry is designed to work with a portable lift and sling, and together they form the portable free-standing gantry system. This system makes it possible to move individuals with mobility impairments with minimal strain or risk to the caregiver, while ensuring complete safety, dignity and comfort for the person being moved. It is important to note that the gantry is designed for internal use only and is not suitable for use in any other environments.

The gantry is designed to be operated by professional healthcare workers and home healthcare workers who may not have a specific range of skills in health care. Typical home-care users may include but are not limited to, teachers, medics, paramedics, carers, family, and friends. Focusing on the dignity and well-being of the person being moved, the simple-to-use gantry maximises the amount of care provided to the person.

You may need to seek specialist advice on how to assist some people with specific moving and handling needs. Sources of advice include, but are not limited to, professional bodies and organisations, occupational therapists, physiotherapists, manual handling advisers and ergonomists with experience in health and social care.

1.2 Manufacture

The product is manufactured at the address below:



Prism Medical UK

Unit 1, Tir Llwyd Industrial Estate, St Asaph Avenue, Kinmel Bay, Conwy, LL18 5JZ Telephone number: 01924 840100

1.3 European Authorised Representative

The address of the European Authorised Representative for this product:



European Healthcare & Device Solutions (Ireland) Ltd. Stratton House, Bishopstown Road, Cork, Ireland. T12 YgTC.

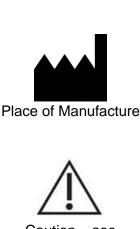
Telephone number: +353(86)2280846

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Symbols Used

The table below includes all symbols from BS EN ISO 15223-1:2021 that can be found in this manual and on the product and what they represent. Refer to this table when you are unsure of what a symbol stands for.









Caution - see instructions for use



Consult instructions for use



UK Conformity Assessed



Safe Working Load



For internal use only



Packaging indicator -Keep dry



Do not use if package is damaged



Packaging indicator -This way up

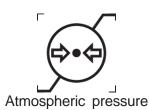




Please observe local laws on recycling



Non-sterile

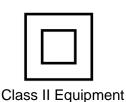


limitation



Temperature range





 $IP_{N_1N_2}$

Degree of protection provided by enclosure. N1: Ingress of particles N2: Ingress of water



Type 'B' applied part



Type 'BF' applied part



European Authorised Representative



Medical Device

Table 1-1

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1.5 Contraindications / Limitations

There are no known "contraindications" associated with the usage of gantry, provided it is used as per the manufacturer's recommendations and guidelines. However, it is recommended that a client specific assessment is completed by a trained and knowledgeable health care professional to determine the method of transfer and use.

The manufacturer does not recommend a required number of operators for the use of the products. This information and recommendation can only be provided after a thorough personalised, case specific assessment, as there are many factors that can influence these decisions.

Limitations of the Gantry include:

- The gantry should only be operated by competent and trained persons.
- The gantry should only be used with patients weighing under the safe working load of the gantry.
- Between the gantry, portable lift and sling, the lowest safe working load of the components should not be exceeded.
- The gantry is only to be used with the portable lift that is installed on it. The gantry must only be relocated by an authorised person.
- The gantry is only compatible with the allocated portable lift and slings found within this manual.
- The gantry is designed for human transfer only. There is no other application to this product.
- The operator of the gantry must always pay attention to the well-being of the patient. Patients should not be left unsupervised during operation.

1.6 Safety Instructions and Warnings

Ensure to read and understand all the statements below, for the safety of the caregivers and users, along with warranty requirements. Failure to follow warnings in this manual may result in; injury to the operator and/or client and/or damage to the gantry or related components.

- If you are unsure on the correct use of this product, please contact the manufacturer or a professional for further information or training.
- The gantry is intended to be installed on a flat and levelled surface prior to use.
- The gantry must be installed only by persons authorized by manufacturer or who have the rights to install and commission the gantry safe for use.
- The gantry and associated potable lift and accessories are not toys. Do not use it for unsafe practices. Do not allow children to play with the product or any of its components. The gantry should not be used for any practice except its intended use.
- In facilities where more than one operator will be responsible for using the gantry, it is important that all such members be trained on the product prior to use. A training program should be established by the facility to acquaint new operators with this equipment.
- Your guarantee is void if persons unauthorised by the manufacturer perform work on the gantry.
- To maintain optimum function, the product should be inspected and maintained on a regular basis. See section 'Daily checks, Servicing and Cleaning' within this user manual.
- The gantry and its associated portable lift are intended only for transferring of a person. The manufacturer will not be responsible for any damage caused by the misuse, neglect, or purposeful destruction of the equipment and/or its associated components.
- Any accessories used with the product should be checked before each use to ensure that they are in good working order. Check for signs of wear and ensure that all labels are legible. Report any unusual wear to your local authorised dealer.

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- Ensure that a clear space is maintained around the gantry. Before using the gantry, always check for and move away any obstacles.
- Never leave a user unattended in the gantry.
- If additional accessories have been supplied with the gantry, refer to the instructions included with those items.
- Under no circumstance should the gantry, associated portable lift, sling, or entire system be put in control of a person who has not been properly trained in the use and care of this equipment. Failure to adhere to this warning may result in serious injury to the operator, and / or the individual being lifted and transferred.
- Unauthorised modifications on this product may affect its safety. The manufacturer will not be held responsible for any accident, incident or deficiencies of performance that occur because of any unauthorised modification to its products. Your guarantee is void if any modifications are made that are not authorised by the manufacturer.
- The gantry and associated accessories, portable lift and sling(s) are intended only for transferring of a person. We will not be responsible for any damage caused by the misuse, neglect, or purposeful destruction of the gantry, and/or its associated components.
- The installation of the gantry and its associated parts are certified to a maximum load of 200 kg (440 lb). Do not exceed the maximum rated load of any of the components.
- Your gantry is for aiding and transferring a person. Do not use it, or allow it to be used, for any other purpose.
- In areas where children are prone to be present be vigilant when using the gantry.
- To reduce the risk of unintended use, when the gantry is not in use remove the sling(s) from the portable lift to prevent entrapment or strangulation should the device be tampered with.
- Between the gantry, portable lift, sling, the lowest maximum load shall always be used.
- A risk assessment must be performed before using any other manufactured sling, carry bar or portable lift to ensure 'safe' use can be established.
- Risk of collision: The person using the portable lift on the gantry should make sure that when raising, lowering, or moving the lift along the gantry that no people or objects will obstruct, be injured or damaged by the movement.
- Serious Injury: If, during the use of this device or because of its use a serious incident has occurred, please report it to the manufacturer and to your national authority.



You may need to seek specialist advice on how to assist some people with specific moving and handling needs. Sources of advice include, but is not limited to, professional bodies and organisations, occupational therapist, physiotherapists, manual handling advisers and ergonomist with experience in health and social care.

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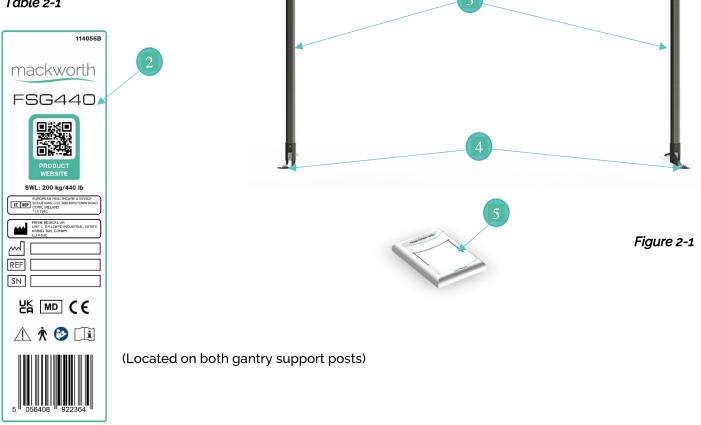


Key Components

Please see below to familiarise yourself with the components of the gantry. The images below show the contents of the gantry. If you have not received all the components contact your local dealer immediately contact details are provided on the last page of this manual.

Item	Description
1	Adjustable Track
2	Info Label
3	Support Post
4	Foot
5	User Manual

Table 2-1



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3 Applied Parts

3.1 Attach/Remove Portable Lift

To install the portable lift onto the gantry for the guidelines below:

- <u>1.</u> Place the portable lift onto a secure surface (chair/bed) and using the handset or button located on the lift's side covers lower the lifting tape enough to allow you to attach the hook to the gantry trolley as shown in Fig. 3-1-1.
- **2.** Locating the Hook in the Reacher and pull down on the lift tape to open hook allowing the hook to be offered up to the trolley as shown in Fig.3-1-2.
- 3. Once located on the hook, release the tension off the lift tape to allow the red latch to close the hook, as shown in Fig. 3-1-3. Store the Reacher pole in a safe place for future use.
- <u>4.</u> Once the Trolley has entered the Hook and the locking mechanism has closed behind itself, using the handset raise the portable lift all the way up until it arrives at top limit as shown in Fig. 3-1-4.
- <u>5.</u> The portable lift is now attached to the gantry.

To remove the portable lift, follow the steps above but in reverse order noting the following points:

• To remove, the locking mechanism must be pulled downwards using your finger to open and allow the trolley to be removed.









Figure 3-1-3



Figure 3-1-4



4 Gantry Adjustments

If you need to adjust the height and width of the gantry, it's important to do so safely. We recommend that two people work together to carry out these adjustments. To ensure a safe and effective adjustment, please follow the guidelines below:

4.1 Adjust the Height

1. To adjust the height of the gantry, first remove the safety and lynch pins found on both support posts, as per Fig. 4-1-1



Figure 4-1-1

2. Press the latch found on the support post and raise the track vertically until the desired height has been reached. It is recommended that this be done on both posts at the same time. See Fig. 4-1-2



Figure 4-1-2

3. Once the desired height has been reached, release the latch, and ensure it locates into the nearest hole found on the moving post. Make sure this is done on both support posts and that the posts are set to the same height. See Fig. 4-1-3 and then re-insert the safety and lynch pins to both support post.



Figure 4-1-3

4. If required, adjust the self-levelling screws to improve stability, which are located on the foot as shown in Fig. 4-1-4.



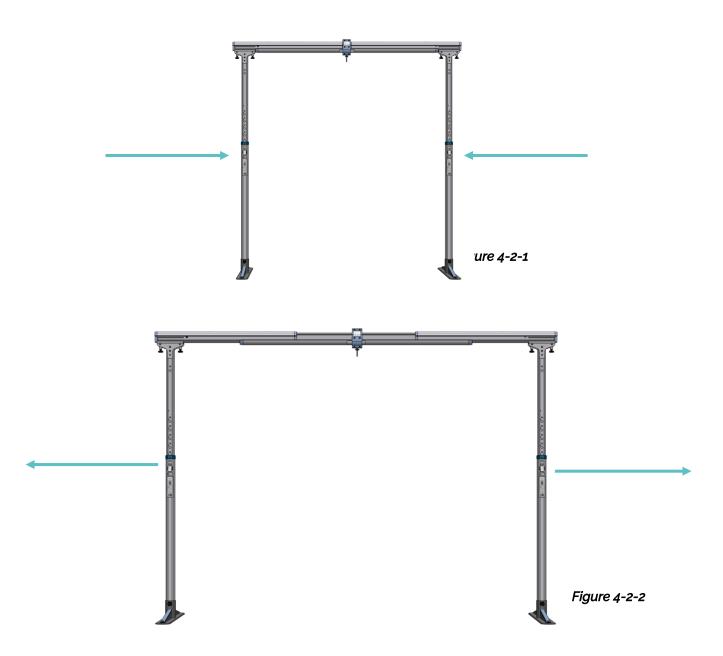
Figure 4-1-4

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4.2 Adjust the Width.

- **1**. To adjust the width of the gantry, first lift one of the support legs vertically up off the floor.
- <u>2.</u> Then adjust the support leg by pushing or pulling it inwards or outwards according to your requirements. If necessary, repeat the process for the other leg. Refer to Fig 4-2-1 and Fig. 4-2-2 and ensure that you have the assistance of two people to support both legs at the same time to ensure a safe adjustment.
- <u>3.</u> Once the gantry is at the desired width place the support leg back onto the floor.
- **4.** If needed, you can also adjust the self-levelling screws located on the foot to improve stability as shown above in Fig. 4-1-4.

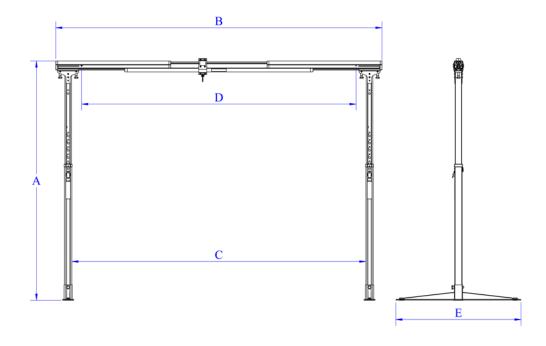




5 Technical Specification

5.1 Gantry Dimensions

Figure 5-1-1



Dimensions (Ref to drawing)	Gantry
A - Minium - Maximum Height	84.3" - 98.7"
B – Minimum – Maximum Width	96.3" – 133"
C – Minimum - Maximum Internal Clearance	82.8" – 120.2"
D – Minimum – Maximum Horizontal Travel	74.8" – 112.2"
E - Foot Depth	51.2"

Table 5-1-1

5.2 Specifications

Gantry Specifications			
Safe Work	king Loads		
FSG440	440lb		
Componer	nt Weights		
Track	15 lb		
Support Post & foot	20 lb		
Fully product	50 lb		
Operation Operation Operation Operation Operation	nal Forces		
Latch	3N		
Moving Trolley – with Portable Lift (0 lb)	6 N		
Moving Trolley – with Portable Lift (440 lb)	97 N		

Table 5-2-1



5.3 Standards Applied

The standards that have been applied to the device are as follows:

- IEC 62366-1:2015: Medical devices Part 1: Application of usability engineering to medical devices
- BS EN ISO 14971:2019: Medical devices. Application of risk management to medical devices
- BS EN ISO 12182:2012: Assistive products for persons with disability. General requirements and test methods
- BS EN ISO 10535:2006: Portable lifts for the transfer of disabled persons. Requirements and test method

6 Environmental Conditions

The sections below will give detailed information regarding the environmental conditions the product should maintain throughout its life cycle. Failure to adhere to these conditions may negatively impact the function of the product. If you are unsure of any environmental conditions, always seek advice.

6.1 Operating Environment

The gantry is intended to be used in dry environments. The gantry is intended for internal use only.

The gantry is intended to be used within a professional healthcare facility or home healthcare environment. The gantry is not suitable for any other environment.

The gantry is not intended to be used in environments where there are rapid changes in the environmental temperature and humidity.

The gantry suffers little from any effects of lint, dust, and light.

- Lint Due to the nature of the gantry being installed closely to the ceiling, very little lint would be likely to gain access into the gantry's workings. The gantry is recommended as per User Guide to be wiped cleaned during every gantry inspection.
- Dust Due to the nature of the gantry being installed closely to the ceiling, very little dust would be likely to gain access into the gantry's workings.
- Light The user adjustments have been designed to be easily recognisable within the specification of the gantries ambient luminescent range of 50 500 lux. Within this range there are no effects on its operation. Additional as the gantry is designed for indoor use only, if required the user may wish to switch on room lighting.

6.1.1 Normal Operating Conditions

+5°C to +40°C (41°F to 104°F) at a relative humidity between 15% to 90% RH, non-condensing but not requiring a water vapour pressure greater than 50hPa and atmospheric pressure between 795hPa to 1060hPa.

6.2 Storage Conditions

The gantry is intended for internal storage within normal environmental conditions. The gantry is intended to be stored in a dry room.

It is not intended to be stored in environments where there are rapid changes in the environmental temperature.

When storing the gantry, ensure that the product has been cleaned and dried. For further information, refer to the 'cleaning' section instructions.

6.2.1 Shipping and Storage Conditions

- -25°C to +5°C (-13°F to 41°F) with any humidity level.
- +5°C to +35°C (41°F to 95°F) at a relative humidity up to 90%.
- +35°C to 70°C non-condensing at a water vapour pressure up to 50hPa.

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7 Daily Checks

Inspection is to be completed prior to each use by the user of the gantry.



Should any of the components in the table below fail the inspection, DO NOT use the gantry. Contact your local authorized dealer for service – contact details are on the last page of this manual.

Ensure all component inspections in the table below are completed prior to each use of the gantry.

Check List before Use:

Component	Service/Inspection required
	Visual inspection of the external of the gantry. Significant damage that may affect the function of the gantry along with a clear safety hazard is unacceptable.
	Check the labelling on the gantry to ensure they are all still legible, this includes the serial number and other important markings. If labels are not legible, then contact your local authorised dealer immediately.
Generic	Check the gantry is level and the feet are located on a stable level surface.
	Check that the safety pins are installed in both support posts.
	Check that all fixing point are all tight and no parts are broken or bent. If they are not tight or you have concerns, then contact your local authorised dealer immediately.
Tuelles OV(leaste	Ensure the wheels are traversing smoothly in the gantry before traversing a patient along the system. Listen for any unusual noises.
Trolley/Wheels	Ensure that the locking device on the QRS is closed when attached to the trolley.

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8 Cleaning



To reduce the risk of cross-contamination it is recommended to clean the gantry and accessories before use by a different person.

Please follow the recommended cleaning guidelines below on cleaning and disinfecting the gantry.

8.1 Gantry Cleaning

For cleaning, the gantry can be cleaned using a damp cloth, soap/water, and antibacterial spray. Do not use a steam cleaner as this could damage the gantry as well as label integrity. Do not use industrial bleaches, abrasive cleaners, or organic solvents.

All cleaning solutions must be thoroughly rinsed off the product at the end of the cleaning process and the product dried using a dry cloth/towel. Always ensure the product is dry before use.

8.2 Disinfecting

Should the gantry require a more thorough cleaning, the use of the Actichlor™ disinfectant product (which is widely available in tablet form and used throughout the healthcare industry) is recommended.



Follow the manufacturer's safety instructions for the use of this cleaning product before use to ensure safe use for the operator and the user.

Ensure the cloth is damp before the cleaning process.

Application is through a clean damp cloth applied to wipe the product down. Use in the following dilutions to ensure an effective clean:

- Actichlor™ dissolvable chlorine tablets provide a concentration of 1000 ppm of available chlorine (0.1%) per 1 tablet.
- 1 tablet (1.7g formed tablet (x1)) will create a virucidal solution, diluted in 1 litre of water to provide effective means to clean a "dirty" product. This is also ideal for use after an outbreak of the Norovirus/winter vomiting and can be used as a precaution against C.Diff. It is effective against viruses, bacteria, spores, yeasts, and moulds.
- A minimum of 5 minutes contact time with the outer components is recommended to prevent virucidal infections, whilst maintaining the integrity of the product. The product can withstand a longer contact period, however a minimum of 5 minutes is required to provide an effective cleaning regime.
- Blood spills should be dealt with by an increased concentration of the solution please refer to the instructions on the manufacturer's product labelling.

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Dilution chart					
Product used as	Product condition	Concentration (ppm)	Dilution qty* (l)	Tablets per 1l (0.26gal)	Contact time (minutes)
Bactericidal	Clean	200	5 (1.32gal)	1	1
Bactericidat	Dirty	1000	1 (0.26gal)	1	5
Yeasticidal	Clean	200	5 (1.32gal)	1	1
reasticidat	Dirty	1000	1 (0.26gal)	1	5
Funcialdal	Clean	2000	1 (0.26gal)	2	15
Fungicidal	Dirty	5000	1 (0.26gal)	5	15
Myarabaatariaidal	Clean	1000	1 (0.26gal)	1	15
Mycrobactericidal	Dirty	5000	1 (0.26gal)	5	15
Virucidal	Clean	500	2 (0.53gal)	1	5
Virucidat	Dirty	1000	1 (0.26gal)	1	5
Charaidal (C Diff)	Clean	1000	1 (0.26gal)	1	10
Sporcidal (C. Diff)	-	-	-	-	-
Charaidal	Clean	5000	1 (0.26gal)	5	10
Sporcidal	-	-	-	-	-

- Dilution is made with water. DO NOT dilute within any other medium.
- When diluted in water, one tablet gives 1000ppm of available chlorine.
- The concentration of the solution depends upon whether the object being cleaned is noticeably dirty (indicated in the table by "Product condition".

Table 8-2-1

Handling and storage safety precautions when using this cleaning agent:					
Advice on Safe Handling	Hygiene	e Measures	Conditions for Safe Storage		
Avoid contact with skin and eyes.	Handle in acco	ordance with good	Keep out of reach of children.		
Do not breathe dust, fumes, gas, mist, vapours, spray.	industrial hygiene and safety practice.		Keep container tightly closed.		
Use only with adequate ventilation.	Remove and wash contaminated clothing before re-use.		Store in suitable labelled containers.		
Wash hands thoroughly after handling.		ls, and any exposed ly after handling.	Storage temperature: 0-25°C (32-77°F).		
Mixing this product with acid or ammonia releases chlorine gas.	9 1				
Individual Protective Measures		Dissolve			
Hand protection: Gloves		Dissolve in cold water – With no agitation, 1 tablet will take approximately 10 minutes to fully dissolve in the water used.			
The information above has been extracted from the Actichlor™ MSDS (Manufacturers Safety Data Sheet). For a full review of the data please follow the link below: http://www.nhsggc.org.uk/media/236215/msds-actichlor-plus.pdf					

Table 8-2-2

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9 Servicing

Regular servicing on the gantry will help prevent breakdowns and reduce repair costs. It will also improve the quality of the product for the end users.



To reduce the risk of injury, no service is to be carried out on the gantry while in use. Service must be completed by an authorised service engineer only. Do not try to service the product yourself; this will void your warranty.

To ensure the safety and continued good function of your gantry, it is recommended to have an approved service engineer perform a routine service every 6 months, this will ensure that the product meets the required standards. It is important to document the service history of the product in the service log found at the back of this user manual after each service.

When the product is serviced, the service checklist must be completed. <u>Service Manual</u> Document Number: 995548.

For information about spare parts, refer to the spare parts manual. Spare Parts Manual Document Number: 992548.

Contact your local authorised dealer if you:

- Need more information.
- Have any questions about the use or service of your product.
- Notice any change in the performance.
- Want to report an unexpected occurrence.
- Want to arrange a service.
- Need to find necessary information for replacement parts and components.

The expected product lifetime is **10 years**. This is dependent on usage and compliance with maintenance, servicing. Regular service on the product will increase the expected lifetime.

10 Troubleshooting

Should a problem arise with the use of the gantry, review the table below. Find the fault and complete the recommended solution. If the fault is not listed below or the solution does not correct the problem, contact your local authorised dealer at once – contact details are provided on the last page of this manual.

Fault	Action
Trolley does not transverse	 Check the track profile is clean and free from any obstructions. Check the wheels are free and regular servicing has been undertaken.
	 Check the telescopic track profiles are all aligned.
Portable lift transverse without assistants	 Check the gantry is located on a level surface. Check that the installation of the gantry has been carry out correctly. Check the traversing track is level.
The gantry is unstable.	 Check the gantry is located on a level surface. Ensure all foot contact points are in contact with the floor. Ensure that track attachment star handle bolt is all secure.

Table 10-1

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11 Disposal

With efforts to improve the environment and reduce waste, where possible our products have been manufactured with recyclable materials. Below are our guidelines on recyclable materials and being environmentally friendly.

The gantry should be disposed by an approved service engineer at the end of its life cycle. For guidelines on correct decommissioning procedures, refer to the commissioning guide: 996086.

Please see the local laws on recycling and respect the current laws for disposal within the community the product is being used within. If there is any uncertainty of the below guidelines, contact your local authorities to decide the proper method of disposal of potentially biohazardous parts and accessories.

Fully recyclables:	Consideration when Recycling:
Aluminium structure (Track, support	Plastic parts (end caps, foot covers)
posts, feet)	
Steel trolley	
Initial packaging of the device	
(cardboard)	
Metallic fixing – screws etc.	

Table 11-1



The product may be contaminated and must be disinfected before recycling or disposal. See section on 'Cleaning' for further details.

12 Warranty

It is impossible for all the risks to be eliminated from use of this product, but to reduce risk and improve safe and proper use, the user should always read and understand the user manual before use. Product failure may occur due to lack of maintenance and care, misuse, unauthorised and improper servicing or alterations, improper storage, and environmental use, or through normal use wear and tear. These factors are all beyond the control from the manufacturer. These risks are taken on by the users.

The gantry comes with a 1-year warranty covering all manufacture defects. Refer to your terms and conditions for more detailed information. The warranty is valid if the product has maintained its intended use and the user manual instructions have been followed. The warranty will not extend to the use of the product when used contrary to the user manual. This guarantee does not affect or in any way limit your statutory rights.

- The liability of the manufacturer under the terms of this guarantee shall be limited to the replacement
 of the defective part(s) to the sales distributor, dealer, agent, person, or entity which purchased the
 equipment from the manufacturer. In no event shall the manufacturer incur liability for any
 consequential or unforeseeable losses.
- 2. This equipment guarantee shall be void if an authorised service engineer does not service the equipment, in accordance with the manufacturer's recommendations, or if any unauthorised persons carry out work on the equipment.
- 3. This guarantee does not apply to failure attributable to normal wear and tear, damage by natural forces, user neglect or misuse or deliberate destruction.
- 4. Do not try to service the product yourself, or the warranty is void.

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13 Service Record History

Complete this section after each service, repair inspection and/or maintenance.

Date:	Time:			
Service Type: Service Inspection □ Repair □	Other □			
Completed By: (Printed name)	(Signature)			
Company:				
Remarks & Actions Taken:				
Product Left in A Safe & Usable Condition: Yes □	No □ (if no explain in actions above)			
Date:	Time:			
Service Type: Service Inspection □ Repair □	Other □			
Completed By:(Printed name)				
Company: Remarks & Actions Taken:				
Remarks & Actions Taken.				
Product Left in A Safe & Usable Condition: Yes \square	No □ (if no explain in actions above)			
	T			
Date:	Time:			
Service Type: Service Inspection □ Repair □	Other			
Completed By: (Printed name)				
Company: Remarks & Actions Taken:				
Nemarks & Actions Taken.				
Product Left in A Safe & Usable Condition: Yes \square	No \square (if no explain in actions above)			
	T			
Date:	Time:			
Service Type: Service Inspection □ Repair □	Other □			
Completed By: (Printed name)	-			
Company:Remarks & Actions Taken:				
Remarks & Actions Taken.				
Product Left in A Safe & Usable Condition: Yes □	No □ (if no explain in actions above)			
Date	There			
Date:	Time:			
Service Type: Service Inspection □ Repair □	Other			
Completed By: (Printed name)	(Signature)			
Company:				
Remarks & Actions Taken:				
Product Left in A Safe & Usable Condition: Yes □	No \square (if no explain in actions above)			

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Date:	Time:
Service Type: Service Inspection □ Repair □	Other □
71 1	
Completed By: (Printed name)	(Signature)
Company:	
Remarks & Actions Taken:	
Nemarks & Actions Taken.	
Product Left in A Safe & Usable Condition: Yes □	No □ (if no ovalain in actions above)
Product Left III A Safe & Osable Condition. Yes	No □ (if no explain in actions above)
Data	Time
Date:	Time:
Service Type: Service Inspection \square Repair \square	Other □
Completed By:(Printed name)	(Signature)
Company:	
Remarks & Actions Taken:	
Product Left in A Safe & Usable Condition: Yes □	No \square (if no explain in actions above)
	'
Date:	Time:
Service Type: Service Inspection □ Repair □	Other □
Service Type. Service inspection in Repair in	Other 🗆
Commission of December 1	(6)
Completed By: (Printed name)	(Signature)
C	
Company:	
Remarks & Actions Taken:	
Product Left in A Safe & Usable Condition: Yes □	No \square (if no explain in actions above)
Date:	Time:
Service Type: Service Inspection □ Repair □	Other □
Completed By:(Printed name)	(Signature)
	G
Company:	
Remarks & Actions Taken:	
Product Left in A Safe & Usable Condition: Yes □	No □ (if no explain in actions above)
Troduct Zore III / Core of Country Core in Trod	The Entire explain in actions above,
Date:	Time:
Service Type: Service Inspection □ Repair □	Other □
	15 1
Completed By: (Printed name)	(Signature)
Company:	
Remarks & Actions Taken:	
Product Left in A Safe & Usable Condition: Yes □	No \square (if no explain in actions above)
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Service Type: Service Inspection Repair Other	Date:	Time:
Completed By:	Service Type: Service Inspection □ Repair □	Other □
Remarks & Actions Taken:		(Signature)
Remarks & Actions Taken:	Company	
Product Left in A Safe & Usable Condition: Yes		
Date: Service Type: Service Inspection □ Repair □ Other □ Completed By:	Remarks & Actions Taken.	
Date: Time: Service Type: Service Inspection Repair Other	Product Left in A Safe & Usable Condition: Yes □	No □ (if no explain in actions above)
Service Type: Service Inspection		
Completed By:	Date:	Time:
Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: □ Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: □ (Printed name) □ (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: □ Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: □ (Printed name) □ (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: □ Time: Service Type: Service Inspection □ Repair □ Other □ (Signature) Company: □ No □ (if no explain in actions above) Date: □ Time: Service Type: Service Inspection □ Repair □ Other □ (Signature) Completed By: □ (Printed name) □ (Signature) Completed By: □ (Printed name) □ (Signature) Company: □ (Signature) Company: □ (Signature) Company: □ (Signature)	Service Type: Service Inspection □ Repair □	Other □
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes	Completed By: (Printed name)	(Signature)
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes	Company:	
Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Time: Service Type: Service Inspection □ Repair □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Time: Service Type: Service Inspection □ Repair □ Completed By: (Printed name) (Signature) Company: (Signature) Remarks & Actions Taken:		
Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Time: Service Inspection □ Repair □ Other □ Company: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Time: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken:	Product Left in A Safe & Usable Condition: Yes □	No □ (if no explain in actions above)
Service Type: Service Inspection		
Completed By:	Date:	Time:
Company:	Service Type: Service Inspection □ Repair □	Other □
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes Date: Time: Service Type: Service Inspection Repair Other (Signature) Completed By:		
Product Left in A Safe & Usable Condition: Yes Date: Time: Service Type: Service Inspection Repair Other (Signature) Completed By:	, ,	
Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Signature) Company: (Signature) Remarks & Actions Taken: No □ (if no explain in actions above) Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken:	Remarks & Actions Taken:	
Service Type: Service Inspection	Product Left in A Safe & Usable Condition: Yes □	No \square (if no explain in actions above)
Service Type: Service Inspection		
Completed By:	Date:	Time:
Company:	Service Type: Service Inspection □ Repair □	Other □
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes Date: Service Type: Service Inspection Repair Other Completed By: (Signature) Company: Remarks & Actions Taken:		
Product Left in A Safe & Usable Condition: Yes No (if no explain in actions above) Date: Service Type: Service Inspection Repair Other Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken:	Pemarks & Actions Taken	
Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken:	Remarks & Actions Taken.	
Service Type: Service Inspection Repair Other Completed By:(Printed name)(Signature) Company:	Product Left in A Safe & Usable Condition: Yes □	No \square (if no explain in actions above)
Service Type: Service Inspection Repair Other Completed By:(Printed name)(Signature) Company:		
Completed By:	Date:	Time:
Company:	Service Type: Service Inspection □ Repair □	Other □
Remarks & Actions Taken:	Completed By: (Printed name)	(Signature)
	Company:	
Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above)	Remarks & Actions Taken:	
	Product Left in A Safe & Usable Condition: Yes □	No □ (if no explain in actions above)

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Service Type: Service Inspection	Date:			Time:
Completed By:	Service Type:	Service Inspection □	Repair □	Other □
Remarks & Actions Taken: No (if no explain in actions above)		·	inted name)	(Signature)
Remarks & Actions Taken:	Company			
Product Left in A Safe & Usable Condition: Yes				
Date: Service Type: Service Inspection □ Repair □ Other □ Completed By:	Nemans a new	ions raken.		
Date: Service Type: Service Inspection □ Repair □ Other □ Completed By:	Product Left in	A Safe & Usable Condition	on: Yes 🗆	No □ (if no explain in actions above)
Service Type: Service Inspection Repair Other Signature) Completed By: Signature Sig				,
Completed By:	Date:			Time:
Company:	Service Type:	Service Inspection \square	Repair 🗆	Other □
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Time: Service Type: Service Inspection □ Repair □ Other □ Company: (Signature) Remarks & Actions Taken: No □ (if no explain in actions above) Date: No □ (if no explain in actions above) Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: (Signature)				
Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Time:				
Date: Service Type: Service Inspection □ Repair □ Other □ Completed By:	Remarks & Act	ions Taken:		
Service Type: Service Inspection Repair Other (Signature) Completed By: (Frinted name) (Signature) Company: No (Signature) Product Left in A Safe & Usable Condition: Yes No (If no explain in actions above) Date: Time: Service Type: Service Inspection Repair Other (Signature) Completed By: (Frinted name) (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes No (If no explain in actions above) Date: Time: Service Type: Service Inspection Repair Other Other (Signature) Company: No (If no explain in actions above) Date: Time: Service Type: Service Inspection Repair Other (Signature) Completed By: (Frinted name) (Signature) Completed By: (Signature)	Product Left in	A Safe & Usable Condition	on: Yes 🗆	No □ (if no explain in actions above)
Service Type: Service Inspection Repair Other (Signature) Completed By: (Frinted name) (Signature) Company: No (Signature) Product Left in A Safe & Usable Condition: Yes No (If no explain in actions above) Date: Time: Service Type: Service Inspection Repair Other (Signature) Completed By: (Frinted name) (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes No (If no explain in actions above) Date: Time: Service Type: Service Inspection Repair Other Other (Signature) Company: No (If no explain in actions above) Date: Time: Service Type: Service Inspection Repair Other (Signature) Completed By: (Frinted name) (Signature) Completed By: (Signature)				
Completed By:				
Company:	Service Type:	Service Inspection □	Repair 🗆	Other □
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes Date: Service Type: Service Inspection Repair Other Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes No (if no explain in actions above) Date: Time: Service Type: Service Inspection Repair Other Other Completed By: (Signature) Completed By: (Printed name) (Signature)				
Product Left in A Safe & Usable Condition: Yes Date: Time: Service Type: Service Inspection Repair Other Completed By: (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes No (if no explain in actions above) No (if no explain in actions above) Time: Service Type: Service Inspection Repair Other Completed By: (Signature) Other Completed By: (Signature) Completed By: (Signature)				
Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Service Type: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: (Signature)	Remarks & Act	lions Taken:		
Service Type: Service Inspection	Product Left in	A Safe & Usable Condition	on: Yes 🗆	No □ (if no explain in actions above)
Service Type: Service Inspection				
Completed By:				
Company:	Service Type:	Service Inspection □	Repair 🗆	Other □
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes Date: Service Type: Service Inspection Repair Other Completed By:				
Product Left in A Safe & Usable Condition: Yes No (if no explain in actions above) Date: Time: Service Type: Service Inspection Repair Other Completed By: (Printed name) (Signature) Company: (Signature)				
Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: (Signature)	Remarks & Act	lons raken:		
Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: (Signature)	Product Left in	A Safe & Usable Condition	on: Yes 🗆	No □ (if no explain in actions above)
Service Type: Service Inspection Repair Other Completed By:(Printed name)(Signature)				
Completed By:(Printed name)(Signature)	Date:			Time:
Company:	Service Type:	Service Inspection □	Repair 🗆	Other □
Remarks & Actions Taken:	Completed By	:(Pr	inted name)	(Signature)
Remarks & Actions Taken:	Company:			
	Remarks & Act	ions Taken:		
Product Left in A Safe & Usable Condition: Yes ☐ No ☐ (if no explain in actions above)	Product Left in	A Safe & Usable Condition	on: Yes 🗆	No □ (if no explain in actions above)

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Date:			Time:
Service Type:	Service Inspection □ R	epair 🗆	Other □
,	·	·	(Signature)
Company.			
Remarks & Act			
Nemarks & Act	ions raken.		
Product Left in	A Safe & Usable Condition: \	∕es □	No \square (if no explain in actions above)
Date:			Time:
Service Type:	Service Inspection □ R	epair 🗆	Other
71			
Completed By	(Printe	d name)	(Signature)
Remarks & Act	ions Taken:		
Product Left in	A Safe & Usable Condition: \	∕es □	No □ (if no explain in actions above)
Date:			Time:
Service Type:	Service Inspection □ R	epair 🗆	Other □
	·	•	
			(Signature)
Remarks & Act	ions Taken:		
Product Left in	A Safe & Usable Condition: \	∕es □	No □ (if no explain in actions above)
			·
Date:			Time:
Service Type:	Service Inspection □ R	epair 🗆	Other
	•		(Signature)
Company.			
Remarks & Act			
Product Left in	A Safe & Usable Condition: \	∕es □	No □ (if no explain in actions above)
Date:			Time:
Service Type:	Service Inspection □ R	epair 🗆	Other □
Corrido Typor	Corvice inspection in	оран	
Completed By	(Printe	d name)	(Signature)
Company:			
Remarks & Act	ions Taken:		
Product Left in	A Safe & Usable Condition: \	/es □	No □ (if no explain in actions above)
1 2 2 2 2 2 2 2 1 1 1	and a security software of the		

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Service Type: Service Inspection	Date:			Time:
Completed By:	Service Type:	Service Inspection □	Repair □	Other □
Remarks & Actions Taken: No (if no explain in actions above)		·	·	(Signature)
Remarks & Actions Taken: No (if no explain in actions above)	Company:			
Product Left in A Safe & Usable Condition: Yes				
Date: Service Type: Service Inspection □ Repair □ Other □ Completed By:				
Date: Service Type: Service Inspection Repair Other Service Type: Service Inspection Service Inspection	Product Left in	A Safe & Usable Condition:	: Yes □	No \square (if no explain in actions above)
Service Type: Service Inspection				
Completed By:	Date:			Time:
Completed By:	Service Type:	Service Inspection □	Repair □	Other □
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes				(Signature)
Product Left in A Safe & Usable Condition: Yes				
Date: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Time: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Product Left in A Safe & Usable Condition: Yes □ No □ (if no explain in actions above) Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken:	Remarks & Act	ions Taken:		
Service Type: Service Inspection	Product Left in	A Safe & Usable Condition:	: Yes □	No \square (if no explain in actions above)
Service Type: Service Inspection				
Completed By:	Date:			Time:
Company: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes Date: Service Type: Service Inspection Repair Other Completed By: Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes No (if no explain in actions above) Date: Product Left in A Safe & Usable Condition: Yes No (if no explain in actions above) Date: Service Type: Service Inspection Repair Other Completed By: Completed By: (Frinted name) (Signature) Completed By: (Signature) Company: Remarks & Actions Taken:	Service Type:	Service Inspection \square	Repair □	Other □
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes Date: Time: Service Type: Service Inspection Repair Other Completed By: (Signature) Company: No (if no explain in actions above) Product Left in A Safe & Usable Condition: Yes Product Left in A Safe & Usable Condition: Yes No (if no explain in actions above) Date: Time: Service Type: Service Inspection Repair Other Completed By: (Signature) Completed By: (Signature) Company: (Signature) Company: (Signature) Company: (Signature)				
Product Left in A Safe & Usable Condition: Yes Date:				
Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Signature) Company: (Signature) Remarks & Actions Taken: No □ (if no explain in actions above) Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken:	Remarks & Act	ions Taken:		
Service Type: Service Inspection	Product Left in	A Safe & Usable Condition:	: Yes □	No □ (if no explain in actions above)
Service Type: Service Inspection				
Completed By:				
Company:	Service Type:	Service Inspection □	Repair 🗆	Other □
Remarks & Actions Taken: Product Left in A Safe & Usable Condition: Yes Date: Service Type: Service Inspection Repair Other Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken:				-
Product Left in A Safe & Usable Condition: Yes No (if no explain in actions above) Date: Service Type: Service Inspection Repair Other Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken:				
Date: Time: Service Type: Service Inspection □ Repair □ Other □ Completed By: (Printed name) (Signature) Company: Remarks & Actions Taken:	Remarks & Act	ions raken.		
Service Type: Service Inspection	Product Left in	A Safe & Usable Condition:	: Yes □	No □ (if no explain in actions above)
Service Type: Service Inspection				
Completed By:	Date:			Time:
Company:	Service Type:	Service Inspection \square	Repair □	Other □
Remarks & Actions Taken:				
Product Loft in A Safa & Usable Condition: Vos D	Remains & ACL	ions ranen.		
Product Left III A Safe & Osable Condition. Fes 🗆 No 🗆 (II no explain in actions above)	Product Left in	A Safe & Usable Condition:	: Yes □	No □ (if no explain in actions above)

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Dealer/service contact details:				
	Contact details:			
	Mackworth USA			
	54 West Industrial Drive			
	O'Fallon, MO 63366 USA			
	314-889-1000			
,	www.mackworthusa.com			
	w w williackworthada.com			

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