

 	PERIODICAL INSPECTION REPORT SHACKLES		DOC. NO.
	PROJECT :		
UNIT :-			

Report No.: Date of Insp.: Next due date of Inspection:															
Proactive Measure : Monthly Inspection Section / Location of use:								Instruments Used (Name & S.No.): Vernier Callipers							
S.No.	Identification Tag	Body dia	Pin Dia	Jaw width	Jaw Length	Capacity	TC Details	Worn out	Corrosion	Deformed	Cracks	Welded	Color coding	Damage Threads	Pin fitting
	Unique No.	mm	mm	mm	mm	MT			‘√’ Applicable box						
1															
2															
3															
4															
5															
6															
7															
8															
9															
Comments (If any):															
BHEL – Execution								BHEL- HSE							
Signature: Name: Date								Signature: Name: Date :							