



HIRAIL INSPECTION

PO Number: _____

Vin #: 1FD0W5HT4KEE14684

Odometer: 208784 mi/km

Licence: _____ Unit #: 55

Work Order #: _____

Customer: CNCIBOO Date: 1/1

DIAGNOSTIC CODES: - Item is OK - Repairs Needed - Adjustment Made - Not Applicable

NOTE: USE "MANUFACTURERS RECOMMENDATION" IN ALL HYDRAULIC SYSTEMS" AS INDICATED ON OIL TANK OR IN OPERATOR'S MANUAL

- ML 01. A) RECORD FRONT HI-RAIL: Radium, MODEL: 450, S#: _____
- A) RECORD REAR HI-RAIL: Radium, MODEL: 450, S#: _____

- ML 02. CHECK ALL TIRES INCL. SPARE FOR WEAR & DAMAGE. ADJ. AIR PRES. AS PER MFG RATING FOR OEM WHEELS/TIRES AND TO MAX TIRE PRESSURE FOR NON-OEM WHEELS/TIRES

>DO NOT EXCEED MAXIMUM INDICATED AIR PRESSURE<

*NOTE: IF ANY TREAD DEPTH IS FOUND TO BE 4/32 OR LESS. COMPANY MUST ADVISED IMMEDIATELY

- ML 03. CHECK ALL RIMS, STUDS, NUTS FOR ANY OF THESE SHOWING SIGN OF DAMAGE, DEFORMATION, LOOSENESS OR CRACKS.

- ML 04. CHECK TORQUE SPEC. STICKER ON EACH NON-OEM WHEEL RIM (MUST BE READABLE)

- ML 05. TORQUE WHEEL NUTS TO SPECIFICATION. CONFIRM TORQUE SPEC: 165 LBS

ALWAYS USE A CLICK TYPE TORQUE WRENCH TO TIGHTEN ALL VEHICLE WHEEL NUTS ON ALL HI-RAIL EQUIPPED VEHICLES, TIGHTEN WHEEL NUTS TO THE APPROVED SPECIFICATIONS SEE TORQUE SPEC. STICKER ON WHEEL RIMS AND OR DECAL FOUND IN VEHICLE CAB

- ML 06. CHECK VEHICLE BRAKE FLEX LINES FOR SCUFFING AND ENSURE SUFFICIENT CLEARANCE FROM MOVING PARTS & CHECK ALL METAL LINES FOR DAMAGE, SEVERE RUST OR POTENTIAL BURST HAZARD

- ML 07. CHECK LOCKING PIN LINKAGE AND HANDLE FOR LOCATING PIN WEAR, OPERATION AND GENERAL CONDITION

- ML 08. CHECK LIFTING BARS AND MANUAL LOCKING DEVICES FOR CRACKS AND DEFORMATION

- ML 09. CHECK FRONT FENDERS(if equipped), MUDFLAP AND BUMPERS FOR MOUNTING AND CONDITION

- ML 10. CHECK RAIL SWEEPS FOR WEAR AND ADJUSTMENT

- ML 11. CHECK ALL RAIL WHEELS FOR FLANGE AND WHEEL FACE CONDITION FOR WEAR OR SEPARATION

- ML 12. CHECK ALL HIRAIL SEAL BEARINGS HUBS FOR ROUGHNESS OR LOOSENESS PULL ALL HI-RAIL NON-SEALED BEARING ASSEMBLY TO INSPECT AND REPACK "USING EPIC EP102 GREASE" OR EQUIVALENT

- ML 13. CHECK SPINDLES FOR WEAR AND CONDITION

- ML 14. CHECK FOR WEAR IN OUTER BEARINGS, TUBE AND SHAFT

- ML 15. CHECK ELECTRIC ISOLATION OF EACH GUIDE WHEEL TO FRAME WHERE APPLICABLE AS PER MANUFACTURER SPECIFICATIONS

- ML 16. IF EQUIPPED INSPECT HI RAIL BRAKE COMPONENTS, LININGS AND LINKAGES FOR WEAR/ADJUSTMENT, OPERATION AND ADJUST IF REQUIRED. CHECK BRAKE LIENS FOR WEAR OR DAMAGE, ENSURE SUFFICIENT CLEARANCE FROM MOVING PARTS CHECK COMPONENTS

- ML 17. CHECK FOR CRACKED BENT OR MISSING DERAIL SKIDS

- ML 18. CHECK VEHICLE FRAME RAILS, ALL FRAME BRACKETS, CROSS MEMBERS, AXLES, CROSS BRACES, TORQUE AND WHEEL ARMS FOR CRACKS, DAMAGES AND STRAIGHTNESS.

THIS COMPLETED FORM MUST BE RETURNED ATTACHED TO YOUR INVOICE

CHRI ROOM 02401

RAFMN RAILGEAR ALIGNMENT RACK DATA

GAS OR DIESEL _____
 VIN# 1FDD0BHT4K1E114684
 VEHICLE MAKE: Ford VEHICLE MODEL: F550 VEHICLE YEAR: 2019
 DOOR STICKER GAWR: _____ DOOR STICKER GAWR FRT: _____ DOOR STICKER GAWR RR: _____
 RAILGEAR S/N: FRT _____ RR _____
 RAILGEAR TYPE: PRESC 460 INSTALLER: _____ DATE: APR 30/2019

SET UP PARALLEL STRING LINES
 A & B MUST BE EQUAL WITHIN 1/32"
 C & D MUST BE EQUAL WITHIN 1/32"

ADJUST STRING LINES AROUND VEHICLE

E, F, G, & H MUST BE EQUAL WITHIN 1/16"
 I, J, K, & L MUST BE EQUAL WITHIN 1/16"
 (E, F, G, & H MAY NOT EQUAL I, J, K, & L)

ADJUST RAIL WHEEL ALIGNMENT

M & O MUST BE EQUAL WITHIN 1/16"
 N & P MUST BE EQUAL WITHIN 1/16"
 Q & S MUST BE EQUAL WITHIN 1/16"
 R & T MUST BE EQUAL WITHIN 1/16"

ADJUST RAILGEAR LATERAL ALIGNMENT

M & O MUST BE EQUAL N & P WITHIN 1/8"
 Q & S MUST BE EQUAL R & T WITHIN 1/8"

ENSURE THAT U & V ARE BETWEEN
 53-7/16" AND 53-9/16"

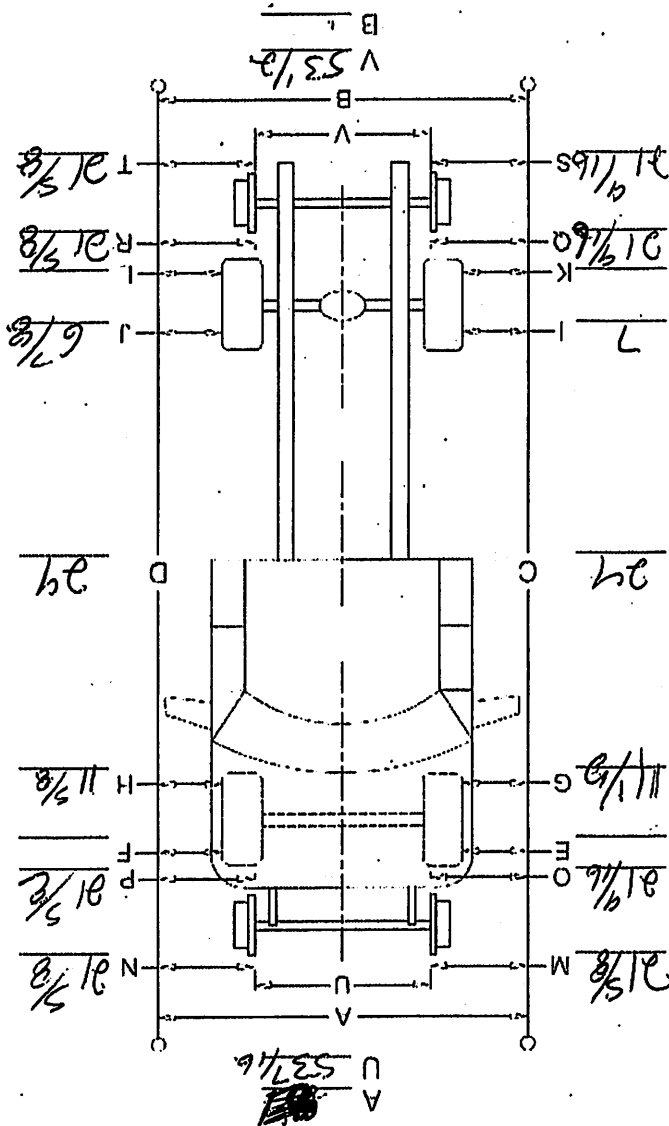
OVER-CENTER ANGLE (DEGREE)
 FRONT _____
 REAR _____

RAIL WHEEL LOADS (LBS)

LEFT FRONT: 1400 RIGHT FRONT: 1400
 LEFT REAR: 1400 RIGHT REAR: 1400

RAIL WHEEL FLANGE TO GROUND CLEARANCE

LEFT FRONT _____ RIGHT FRONT _____
 LEFT REAR _____ RIGHT REAR _____



MOUNTING HEIGHT FRONT: _____ MOUNTING HEIGHT REAR: _____
 STOCK TURNING DIAMETER: _____ MODIFIED TURNING DIAMETER: _____
 OEM: VEHICLE WEIGHT: _____ FRONT GAWR: _____ REAR GAWR: _____
 MODIFIED: VEHICLE WEIGHT: _____ FRONT GAWR: _____ REAR GAWR: _____

FAX COMPLETED FORM TO TAKE SANUTE AT FAX # 570-802-0491

MAY 31, 2018 REV "D"

