

C.Herman Trucking  
 MAINTENANCE REQUEST FORM

R11-10  
 JUN

| Description & UNIT #         |          | Request Date:                                      |                             |                 |          |
|------------------------------|----------|--|-----------------------------|-----------------|----------|
| Reference Date:<br>MM/DAY/YR | Operator | Maintenance Request                                | Work - Completed - Comments | Completion Date | Mechanic |
| 02-26-20                     | -        | need Mud flap Front of Legs                        | OK                          | March 2         | Ceung    |
|                              | -        | air Line rubbing against Air Tank                  | done                        | March 2         | ✓        |
|                              | -        | Check all air line & electrical cord through frame | Secure lines                | March 2         | ✓        |
|                              | -        | #2 LHS Hub Coat on oil                             | replace wheel seal          | Feb. 26         | ✓        |
|                              | -        | #3 RHS air Bag                                     | replace                     | Feb. 26         | Ceung    |
|                              | -        | check all S cams                                   | replace all S cams & tube   | Feb. 27-28      | ✓        |
|                              | -        | #7 RH air bag                                      | replace air Bag             | March 2         | Ceung    |
|                              | -        | wheel seal all wheel                               | replace all Seal            | Feb. 27-28      | Ceung    |
|                              |          |  |                             |                 |          |
|                              |          |  |                             |                 |          |

| OIL CHANGE: | DATE: MM/DD/YR | Kilometers at Change | Hours at Change | Mechanic |
|-------------|----------------|----------------------|-----------------|----------|
|             |                |                      |                 |          |

Please reference the Pre/Post trip inspection date on the maintenance request form, which refers to the maintenance required / requested.

MAINTENANCE REQUEST FORM

| Description & UNIT #         |        | Operator | Maintenance Request           | Work - Completed - Comments | Completion Date | Mechanic |
|------------------------------|--------|----------|-------------------------------|-----------------------------|-----------------|----------|
| Reference Date:<br>MM/DD/YYR | GT 015 |          |                               |                             |                 |          |
| Dec 2                        |        |          | wash                          | done                        |                 | C.H.     |
|                              |        |          | replace taper pulley          | done                        |                 | C.H.     |
|                              |        |          | grease                        | done                        |                 | C.H.     |
|                              |        |          | check taper rollers & pulleys | done                        |                 | C.H.     |
|                              |        |          | set tire pressure             | done                        |                 | C.H.     |
|                              |        |          | grease                        | done                        |                 | C.H.     |
|                              |        |          | oil brakes                    | done                        |                 | C.H.     |
|                              |        |          |                               |                             |                 |          |
|                              |        |          |                               |                             |                 |          |
|                              |        |          |                               |                             |                 |          |
|                              |        |          |                               |                             |                 |          |
|                              |        |          |                               |                             |                 |          |

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