

MOBILE EQUIPMENT OPERATOR CERTIFICATE

This certificate confirms that

OPERATOR'S NAME
Christopher Wilson

OPERATOR'S SIGNATURE
Christopher Wilson

Has successfully fulfilled all the theoretical and practical training and evaluation requirements listed in federal and regional regulations and hereby authorized to operate the type(s) of mobile equipment listed on the reverse

20-Mar-23

EXPIRE DATE

20-Mar-26

TRAINER NAME
Jimmy Farmer

TRAINER SIGNATURE
Jimmy Farmer

TRAINER NAME
Jimmy Farmer

TRAINER SIGNATURE
Jimmy Farmer

AUTHORIZING PERSON
Edward Maxwell

AUTHORIZING PERSON SIGNATURE
Edward Maxwell

SHIP8

SHIP8

Valid at SHIP8 ONLY

MOBILE EQUIPMENT TYPE(S)	TRAINER/EVALUATOR	DATE OF ISSUE
FL	Jimmy Farmer	20-Mar-23
OP	Jimmy Farmer	20-Mar-23
RT	Jimmy Farmer	20-Mar-23
EPJ	Jimmy Farmer	20-Mar-23
TSP	Jimmy Farmer	20-Mar-23

REFER TO THIS OPERATOR'S CERTIFICATION FOLDER FOR COMPLETE DETAILS ON TRAINING & EVALUATION (INCLUDING MOPE SPECIFICS OR EQUIPMENT'S ATTACHMENTS)