

# MOBILE EQUIPMENT OPERATOR CERTIFICATE

This certificate confirms that

OPERATOR'S NAME: **Gina Martin** OPERATOR'S SIGNATURE: *Gina Martin*

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.

DATE ISSUED: **11/13/2023**

EXPIRE DATE: **11/13/2026**

TRAINER NAME: **Jimmy Farmer** TRAINER SIGNATURE: *Jimmy Farmer*

EMPLOYER NAME: **SHIP8** EMPLOYER SIGNATURE: *Edward Maxwell*

SHIP8 AUTHORIZING PERSON: **Edward Maxwell** EMPLOYER SIGNATURE: *Edward Maxwell*

Valid at SHIP8 ONLY

MOBILE EQUIPMENT TYPE(S)	TRAINER/EVALUATOR	DATE OF ISSUE
OP	Jimmy Farmer	13-Nov-24
RT	Jimmy Farmer	24-Jan-24
EPJ	Jimmy Farmer	24-Jan-24

REFER TO THIS OPERATOR'S CERTIFICATION FOLDER FOR COMPLETE DETAILS ON TRAINING & EVALUATION INCLUDING MORE SPECIFICS ON EQUIPMENT & ATTACHMENTS!