

# MOBILE EQUIPMENT OPERATOR CERTIFICATE

This certificate confirms that

**OPERATOR'S NAME**  
Diontae Banks

**OPERATOR'S SIGNATURE**  
*Diontae Banks*

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.

**ISSUE DATE**

2/5/2024

**EXPIRE DATE**

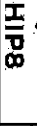
2/5/2027

**TRAINER NAME**  
Jimmy Farmer



**TRAINER SIGNATURE**  
*Jimmy Farmer*

**EVALUATOR NAME**



**EVALUATOR SIGNATURE**  
*Edward Maxwell*

**SHIP8**

**EDWARD MAXWELL**  
AUTHORIZING PERSON

Valid at SHIP8 ONLY

MOBILE EQUIPMENT TYPE(S)	TRAINER/EVALUATOR	DATE OF ISSUE
FL	Jimmy Farmer	5-Feb-24
CL	Jimmy Farmer	5-Feb-24
EPJ	Jimmy Farmer	5-Feb-24

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