

# MOBILE EQUIPMENT OPERATOR CERTIFICATE

Valid at SHIP8 ONLY

This certificate confirms that

OPERATOR'S NAME: **Gabriele Gailam** OPERATOR'S SIGNATURE: *Gabriele Gailam*

Has successfully fulfilled all the theoretical and practical training and evaluation requirements listed in Section 1 and regional regulations and hereby authorized to operate the type(s) of mobile equipment listed on the reverse

DATE ISSUED: **2/5/2024**

EXPIRE DATE: **2/5/2027**



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



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

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

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