



SHIP8 INC

**MOBILE EQUIPMENT**

**OPERATOR CERTIFICATE**

This certificate confirms that:

OPERATORS NAME: **Kenneth Mitchell** OPERATORS SIGNATURE: *Kenneth Mitchell*

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

CERTIFICATION DATE: **1/8/2025** DATE ISSUED: **1/8/2025** DATE EXPIRES: **1/8/2028**

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

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

**Valid at SHIP8 INC.**

MOBILE EQUIPMENT TYPE(S): **FL/CL** TRAINER NAME: **Jimmy Farmer** DATE OF ISSUE: **1/8/2025**

**EPI** Jimmy Farmer 1/8/2025

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

IF YOU BELIEVE YOUR CERTIFICATION IS INCORRECT, SEE SAFETY TEAM