



**MOBILE EQUIPMENT OPERATOR CERTIFICATE**

Valid at SHIP8 INC.

MOBILE EQUIPMENT TYPE(S)

TRAINER NAME

This certificate confirms that

OP

Jimmy Farmer

DATE OF ISSUE  
5/27/2025

OPERATORS NAME  
Erica Stivenson

OPERATORS SIGNATURE  
*Erica Stivenson*

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 types of mobile equipment listed on the reverse.

CERTIFICATION DATE  
5/27/2025

DATE ISSUED  
5/27/2025

DATE EXPIRES  
5/27/2028

TRAINER NAME  
Jimmy Farmer

TRAINER SIGNATURE  
*Jimmy Farmer*

EMPLOYER NAME  
SHIP8, INC

AUTHORIZING PERSON  
Edward Maxwell

EMPLOYER SIGNATURE  
*Edward Maxwell*

IF YOU BELIEVE YOUR CERTIFICATION IS INCORRECT, SEE SAFETY TEAM

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