



**MOBILE EQUIPMENT OPERATOR CERTIFICATE**

Valid at SHIP8 INC.

MOBILE EQUIPMENT TYPE(S)  
TRAINER NAME  
DATE OF ISSUE

This certificate confirms that

OPERATORS NAME  
Jakayla Lewis

OPERATORS SIGNATURE  
*Jakayla Lewis*

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 license.

CERTIFICATION DATE

DATE ISSUED

DATE EXPIRES

7/23/2025

7/23/2025

7/23/2028

TRAINER NAME

TRAINER SIGNATURE  
*Jimmy Farmer*

EMPLOYER NAME

AUTHORIZING PERSON  
*Edward Maxwell*

SHIP8, INC

Edward Maxwell

EMPLOYER SIGNATURE

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)