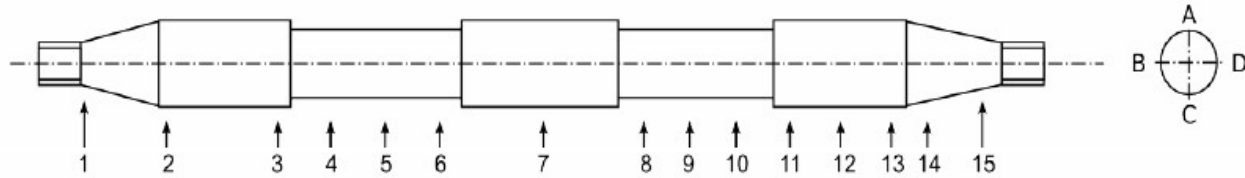


SHAFT TRUENESS INSPECTION REPORT

Project:		Hull No:	Report No.:
Inspection Type: <input type="checkbox"/> Visual <input type="checkbox"/> NDT <input type="checkbox"/> Test		Time of Inspection:	Temperature:
Description of Parts: Propulsion Shafting Examination and Trueness Check		Ref. Standard:	Ref. Drawings:

Results: Before After Re-Rectification



Location	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
A															
B															
C															
D															

Remarks:

<input type="checkbox"/> Bent.	<input type="checkbox"/> Keyway damaged.	<input type="checkbox"/> End thread damaged.
<input type="checkbox"/> Cracked Longitudinal	<input type="checkbox"/> Cracked Circumferential	<input type="checkbox"/> Wear down in way of bearing area
<input type="checkbox"/> Others:		

Recommendation:

<input type="checkbox"/> Bent to be rectified.	<input type="checkbox"/> Keyway to be repaired.	<input type="checkbox"/> End thread to be repaired.
<input type="checkbox"/> Crack to be machined off, rebuilt by welding and machined to original.	<input type="checkbox"/> DPI	
<input type="checkbox"/> Worn down area to be machined off, built up by welding and machined to original.	<input type="checkbox"/> MPI	
<input type="checkbox"/> Others:		

Yard Representative

Classification Society

Owner's Representative

Name:

Name:

Name:

Date:

Date:

Date: