



11150-163rd Street
Edmonton, AB
T5M 3R5
780-483-0244
GST no. R104304738

pk

SALE TRANSACTION

CUSTOMER ID: 005-78152
CUSTOMER NAME:
Perry F

02-9248-06

LIGHT BGR LED 22TM 120W CASH 189.99 G
8815920
WORKLIGHT LED 18W 21-6115-06 CASH 24.99 G
8816159
WORKLIGHT LED 18W 21-6115-06 CASH 24.99 G
8816159
SUB-TOTAL: CASH 239.97

	5.0%	GST	CASH 12.00
No. Items 3			
Balance to pay			CASH 251.97

VISA
** TRANSACTION RECORD **
Trans. #: 10708
CASH 251.97

Visa Purchase
XXXXXXXXXXXX4623 C
ALU: R0000000031010
App Name: Visa Credit

Amount CASH 251.97

APPROVED 023192
00-001 (001) 023192
P805C507/P805C07
023001001001
09/23/2020 9:27:29 AM

IVR: 0080008000
ISL: F800

Customer Copy



Preventative Maintenance Checklist

Document No. FOR-349
Revision No. R30
Revision Date: 2019-11-12
Owner (Dept.): Equipment and Assets

MORGAN

Company: ☒ Morgan ☐ Third Party (Name):

Work Order No.: ACHIE561

Mechanic: YOUNESS CHOKAI

Unit No.: 02-6142

Date: 30-09-2020

Equipment Type: EXCAVATOR/CAT

Model: 349F

Hour Meter: 5822

Equipment Safety

Serial No.: HPD20096

KM: N/A

	Good		Repair		Pre / Post Delivery	Good		Repair	
	Yes	No	Yes	No		Yes	No	Yes	No
Pre / Post Delivery	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Machine Guarding / Visible Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Carriage / Tires PSI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Test Parking and Service Brakes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fuel Tank Drain Guarded / Plugged	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspect / Grease Driveshafts and U Joints	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Positive Air Shut-Off (Check Operation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible Leaks / Visible Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lights / Beacons / Flashers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steering	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A/C / Heater / Fans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seatbelt	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Extinguisher (Date) Bracket	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mirrors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	First Aid Kit / Spill Kit / Operator Manual	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glass	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Isolation Point for Lockout	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check all Hydraulic Hoses, Lines, and Fittings for Signs of Leaks, Cracks, Wear Spots.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Block Heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check All Safety Devices (Hyd lockouts, pin neutral, seat belt cutter, secondary exits and latches)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two-Way Radio	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Back-Up Alarm / Horn	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ice Lugged	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Preventative Maintenance Schedule

Service Type	250hr	500hr	750hr	1000hr	2000hr	Comments
Change Engine Oil Every 500 hrs, SOS Sample Every 250 hrs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	LEFT Boom - light need to be changed
Change Engine Oil Filter (Cut Open and Inspect)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change All Fuel Filters (Cut Open and Inspect)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	BOULDERHEADS NEED TO BE CHANGED
Drain Water from Fuel Tank and Water Separator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Check Air Filters, Change as Required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Check All Oil Levels (Clean Off Magnetic Plugs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Check Coolant Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Check Belts and Pulleys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Check Cab Air Filter, Replace or Clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Grease Entire Unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Transmission Filter (Cut Open and Inspect) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Hydraulic Filter (Cut Open and Inspect) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Swing Drive Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Final Drive Oils (Excavators / Dozers) (SOS Sample) (*1 note)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Winch Oil and Filter (Cut Open and Inspect, (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Transmission Oil and Filters (Cut Open and Inspect, SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Drop and Clean Out Stump Pan (*2 note)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Hydraulic Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Pump Drive (Excavator)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Transfer Case Oil (Articulated Equipment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Comments: Note: Sample engine oil every 250 hours and all other components every 500 hours.
*1 note: D6 and smaller final drives and excavators - final drives changed at 500 hours. Clean off magnetic plugs.
*2 note: Activity to only be completed by mechanics with proper tools and procedures.

Mechanic

YOUNESS CHOKAI

Name (Print)

ACH

Signature

30-09-2020

Date



PARTS INVOICE

Finning (Canada), a division of Finning International Inc.

Page: 1 (2)

MILDRED LAKE INDUSTRIAL PARK HWY 83
MILDRED LAKE, AB TOP 1C0
(780) 790-2010
(780) 791-1557 FAX

Invoice Date 28/12/19
Invoice Number 946565552
Invoice Total \$1,224.99
Payment Terms NET 60 DAYS
Due Date 26/02/20

Sales Person FINNING CANADA

Customer Tax Exemption No.
Currency CANADIAN DOLLAR

CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
17303 102 AVENUE
EDMONTON AB T5S 1J8

Order Date 26/12/19
Customer's PO Number 77102
Order Number 0044723206 / AD1 / 30148533

Temp Order Number 0012844136
Finning Quotation Number 0012844136

CUSTOMER

Purchasing Agent
Customer Contact
Delivery Date 28/12/19
CANDREWS@MCEL.CA

Bill of Lading Number 10000010237116176
Delivery Specifications HOLD FOR FORT HILLS PATRICK 02-6748

Delivery Method CUSTOMER PICKUP

SHIP TO
MORGAN CONSTRUCTION
MORGAN CONSTRUCTION
* FORT HILLS SITE *

pk

Legal Land Description (LLD)
Free Carrier (Transport ID)-COL

MILDRED LAKE AB T9H 3L1

Make Unit No
Model Year
Serial Number CAT0349FLHPO20096

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET1
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HOLD FOR FORT HILLS PATRICK 02-6748

1		40	5207951	BOLT-HEX HEA	PC	13.55	542.00	R
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3		16	3012299	BOLT TRACK	PC	4.37	69.92	R
			Package Number P014121620				Packed Qty 35	
			Package Number P013374123				Packed Qty 5	

4		16	1504742	NUT-TRACK	PC	1.92	30.72	R
			Package Number P014121641				Packed Qty 16	

			Package Number P014121641				Packed Qty 16	
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PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 R10001

This invoice is subject to and incorporates by reference the Finning Terms and Conditions which are attached to the quote and/or delivery note and govern this transaction between Finning and Customer to the exclusion of all other contractual terms and conditions. In the event of a conflict between the aforementioned Terms and Conditions, this invoice, the order confirmation or any other documentation associated with this transaction, the Terms and Conditions shall prevail. These items are controlled by the U.S. government and authorized for export only to the country of ultimate destination for use by the ultimate consignee or end-user(s) herein identified. They may not be resold, transferred, or otherwise disposed of, to any other country or to any person other than the authorized ultimate consignee or end-user(s), either in their original form or after being incorporated into other items, without first obtaining approval from the U.S. government or as otherwise authorized by U.S. law and regulations.

1. Returnable Indicator: R for Returnable, N for Non-returnable

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(346-6464)



PARTS INVOICE

Finnning (Canada), a division of Finnning International Inc.

Page: 2 (2)

MILDRED LAKE INDUSTRIAL PARK HWY 63
MILDRED LAKE, AB T0P 1C0
(780) 790-2010
(780) 791-1557 FAX

Invoice Date 28/12/19
Invoice Number 946565552
Invoice Total \$1,224.99
Payment Terms NET 60 DAYS
Due Date 26/02/20

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET
5	4	2517757		SEAL AS-MSTR	PC	21.13	84.52	N
Package Number P014121620				Packed Qty 4				
6	4	2518364		RING-THRUST	PC	12.18	48.72	N
Package Number P014121620				Packed Qty 4				
7	2	2518368		BUSHING-MSTR	PC	74.86	149.72	R
Package Number P014121641				Packed Qty 2				
8	2	2573604		PIN-TRK MAST	PC	120.53	241.06	R
Package Number P014121622				Packed Qty 2				

Sub-Total 1,166.66
GST 58.33
Invoice Total CAD \$1,224.99

Thank you for your business.

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT0001

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Page: 1 (1)

Finning (Canada), a division of Finning International Inc.

118 MACDONALD CRESCENT
FORT MCMURRAY, AB T9H 4B2
(780) 743-2218
(780) 791-0584 FAX

Invoice Date 27/12/19
Invoice Number 946564695
Invoice Total \$405.24
Payment Terms NET 60 DAYS
Due Date 25/02/20

Currency CANADIAN DOLLAR

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
17303 102 AVENUE
EDMONTON AB T5S 1J8

Customer Tax Exemption No.

Order Date 27/12/19
Customer's PO Number 77108
Order Number 0044723479 / AE1 / 30145693
Temp Order Number

CUSTOMER

Finning Quotation Number
Purchasing Agent ANGUS MCKINNON 1T
Customer Contact JOE DEMONE 780 305 6240
Delivery Date 27/12/19
Bill of Lading Number 10000010237091947
Delivery Specifications WILL CALL D04

Commitment

Delivery Method CUSTOMER PICKUP

SHIP TO
MORGAN CONSTRUCTION AND
FORT HILLS SITE
FORT MCMURRAY AB T9H 4B2

Delivery Terms Free Carrier (Transport ID)-COL
Legal Land Description (LLD) DATA FEED

02-6748-09
Serial Number HPD20096
Make CAT
Model 349F
Unit No 02.6748-PD20096
Year 2018

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET
1		10	2862110	RETAINER GET	PC	19.66	196.60	R
			Package Number	P013074202	Packed Qty	10		
2		2	4707973	TIP-DOUBLE S	PC	94.67	189.34	R
			Package Number	P013074203	Packed Qty	2		

Sub-Total 385.94
GST 19.30
Invoice Total CAD \$405.24

Thank you for your business.

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT0001

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PARTS INVOICE

Page: 1 (1)

Finning (Canada), a division of Finning International Inc.

118 MACDONALD CRESCENT
FORT MCMURRAY, AB T9H 4B2
(780) 743-2218
(780) 791-0584 FAX

Invoice Date 04/01/20
Invoice Number 946576035
Invoice Total \$252.24
Payment Terms NET 60 DAYS
Due Date 04/03/20
Currency CANADIAN DOLLAR

Customer Tax Exemption No.

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
17303 102 AVENUE
EDMONTON AB T5S 1J8

Order Date 01/01/20
Customer's PO Number 77252
Order Number 0044728376 / AE1 / 30187849
Temp Order Number 0012848118
Finning Quotation Number 0012848118

Purchasing Agent
Customer Contact CANDREWS@MCEL.CA
Delivery Date 04/01/20
Bill of Lading Number 10000010237425193
Delivery Specifications UNIT # 02-6748, nick

Delivery Method CUSTOMER PICKUP

SHIP TO
MORGAN CONSTRUCTION AND
FORT HILLS SITE
FORT MCMURRAY AB T9H 4B2

Delivery Terms Free Carrier (Transport ID)-COL
Legal Land Description (LLD) DATA FEED

Make CAT Unit No 02.6748-PPD20096
Model 349F Year 2018
Serial Number HPD20096

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET
----------	----------	---------	----------	-------------	-----	-------------	-----------------	-----

UNIT# 02-6748, HOLD FOR MORGAN FORT HILLS, ATT: NI
CK

1	1	3432433	HANDLE AS	PC	240.23	240.23	R
Package Number 9S3067195182				Packed Qty 1			

Sub-Total 240.23
GST 12.01
Invoice Total CAD \$252.24

Thank you for your business.

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.

GST/HST Registration Number: 101801561 RT0001

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Page: 1 (1)

MILDRED LAKE INDUSTRIAL PARK HWY 63
MILDRED LAKE, AB TOP 1C0
(780) 790-2010
(780) 791-1557 FAX

Invoice Date 04/01/20
Invoice Number 946575860
Invoice Total \$851.53
Payment Terms NET 60 DAYS
Due Date 04/03/20
Currency CANADIAN DOLLAR

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
17303 102 AVENUE
EDMONTON AB T5S 1J8

Customer Tax Exemption No.

Order Date 26/12/19
Customer's PO Number 77102
Order Number 0044723206 / AD1 / 30188989
Temp Order Number 0012844136
Finning Quotation Number 0012844136
Purchasing Agent
Customer Contact CANDREWS@MCEL.CA
Delivery Date 04/01/20
Bill of Lading Number 10000010237433891
Delivery Specifications HOLD FOR FORT HILLS PATRICK 02-6748

CUSTOMER

Commitment

Delivery Method CUSTOMER PICKUP

SHIP TO
MORGAN CONSTRUCTION
MORGAN CONSTRUCTION
* FORT HILLS SITE *
MILDRED LAKE AB T9H 3L1

AK, Legal Land Description (LLD)
Free Carrier (Transport ID)-COL

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET
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2	1	1243296	SPROCKET-TRK 345B	PC	810.98	810.98	R
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Package Number 9S3067177441

Packed Qty 1

Sub-Total	810.98
GST	40.55
Invoice Total CAD	\$851.53

Thank you for your business.

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT0001

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FINNING.**PARTS INVOICE**

Page: 1 (2)

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MILDRED LAKE INDUSTRIAL PARK HWY 63
MILDRED LAKE, AB T0P 1C0
(780) 790-2010
(780) 791-1557 FAXInvoice Date 25/01/20
Invoice Number 946622107
Invoice Total \$2,514.76
Payment Terms NET 60 DAYS
Due Date 25/03/20
Currency CANADIAN DOLLAR

Customer Tax Exemption No.

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
17303 102 AVENUE
EDMONTON AB T5S 1J8Order Date 25/01/20
Customer's PO Number 78205
Order Number 0044765944 / AE1 / 30378025
Temp Order NumberFinning Quotation Number
Purchasing Agent
Customer Contact
Delivery Date
Bill of Lading Number
Delivery Specifications
SCOTT VAN DE VOORDE
NATHAN 403-618-6011 MORGAN
25/01/20
10000010238953060
NATHAN / 02-6748 / GORT HILLS

CUSTOMER

*Commitment*SHIP TO
MORGAN CONSTRUCTION AND
FORT HILLS SITE
FORT MCMURRAY AB T9H 4B2Delivery Terms
Free Carrier (Transport ID)-COLUnit No
Year

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET
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1	1	1	20R1312	MOTOR G ELEC	PC	1,260.38	1,260.38	N
---	---	---	---------	--------------	----	----------	----------	---

Package Number P012354133 Packed Qty 1
Lot Number 20R1312 PCCLASS:REMAN
CONDITION:FINISHED
INSPECTION LINE:04IF CORE RETURNED WITHIN 60 DAYS AND IN FULL CONDITION
THE WHOLE CHARGE WILL BE REFUNDEDAT LATE RETURN THE REFUND WILL DECREASE
20% AFTER THE 60 DAYS
AFTER 120 DAYS NO REFUND WILL BE GIVEN
Planned return date 20/03/25

2	1	1	CORECHGCAT	CORE CHARGE CAT	PC	1,119.99	1,119.99	
3	2	1	9Y6089	GASKET	PC	7.32	14.64	N

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.

GST/HST Registration Number: 101801561 RT0001

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1. Returnable Indicator: R for Returnable, N for Non-returnable

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PARTS INVOICE

Finning (Canada), a division of Finning International Inc.

Page: 2 (2)

MILDRED LAKE INDUSTRIAL PARK HWY 63
MILDRED LAKE, AB T0P 1C0
(780) 790-2010
(780) 791-1557 FAX

Invoice Date 25/01/20
Invoice Number 946622107
Invoice Total \$2,514.76
Payment Terms NET 60 DAYS
Due Date 25/03/20

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET
Package Number			P012354134					
			Packed Qty	2				

Sub-Total 2,395.01
GST 119.75
Invoice Total CAD \$2,514.76

Thank you for your business.

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT0001

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1. Returnable Indicator: R for Returnable, N for Non-returnable

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(346-2464)

FINNING.**PARTS INVOICE**

Page: 1 (1)

Finning (Canada), a division of Finning International Inc.

118 MACDONALD CRESCENT
FORT MCMURRAY, AB T9H 4B2
(780) 743-2218
(780) 791-0584 FAXInvoice Date 05/03/20
Invoice Number 946704782
Invoice Total \$600.60
Payment Terms NET 60 DAYS
Due Date 04/05/20
Currency CANADIAN DOLLAR

Customer Tax Exemption No.

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
17303 102 AVENUE
EDMONTON AB T5S 1J8Order Date 01/03/20
Customer's PO Number 79680
Order Number 0044823898 / AD1 / 30734814
Temp Order NumberFinning Quotation Number
Purchasing Agent CA7384 ESP 1T
Customer Contact JZULIANI@MCEL.CA
Delivery Date 05/03/20
Bill of Lading Number 10000010241802775
Delivery Specifications ATTN JOSH / FORT HILLS

CUSTOMER

Commitment

Delivery Method CUSTOMER PICKUP

SHIP TO
MORGAN CONSTRUCTION AND
HOLD FOR PICKUP AD1
ML ABDelivery Terms Free Carrier (Transport ID)-COL
Legal Land Description (LLD)Make Model Unit No
Year

02-6748

-09

CAT0349 FLHP D20096

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET1
3	5	4707973	TIP-DOUBLE S	PC	94.74	473.70	R	
		Package Number		P013648275	Packed Qty	5		
4	5	2862110	RETAINER GET	PC	19.66	98.30	R	
		Package Number		P014685678	Packed Qty	5		

Sub-Total 572.00
GST 28.60
Invoice Total CAD \$600.60

Thank you for your business.

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT10001

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PARTS INVOICE

Page: 1 (2)

Finning (Canada), a division of Finning International Inc.
118 MACDONALD CRESCENT
FORT MCMURRAY, AB T9H 4B2
(780) 743-2218
(780) 791-0584 FAX

Invoice Date 10/06/20
Invoice Number 946859413
Invoice Total \$100.95
Payment Terms NET 60 DAYS
Due Date 09/08/20
Currency CANADIAN DOLLAR

Customer Tax Exemption No.

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
17303 102 AVENUE
EDMONTON AB T5S 1J8

Order Date 10/06/20
Customer's PO Number 81779
Order Number 0044954082 / AE1 / 31434109
Temp Order Number 0013001353
Finning Quotation Number 0013001353
Purchasing Agent ROBMACCOLLUMCA39971E
Customer Contact CRAIG ANDREWS 709-636-8246
Delivery Date 10/06/20
Bill of Lading Number 10000010247383100
Delivery Specifications HOLD FOR MORGAN POPLAR CREEK



SHIP TO
MORGAN CONSTRUCTION
MORGAN CONSTRUCTION
C/O FINNING AE1 WILL CALL
FORT MCMURRAY AB T9H 4B2
WILL CALL

Delivery Method CUSTOMER PICKUP
Delivery Terms Free Carrier (Transport ID)-COL
Legal Land Description (LLD) DATA FEED
Make CAT Unit No 02.6748-PD20096
Model 349F Year 2018
Serial Number HPD20096

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET1
----------	----------	---------	----------	-------------	-----	-------------	-----------------	------

Summ Drive

1	1	6V7238	VALVE	PC	56.20	56.20	R
---	---	--------	-------	----	-------	-------	---

2	1	3K0360	SEAL	PC	2.12	2.12	N
---	---	--------	------	----	------	------	---

7	1	8T6404	SEAL-O-RING	PC	8.92	8.92	N
---	---	--------	-------------	----	------	------	---

8	4	1P3703	SEAL	PC	4.01	16.04	N
---	---	--------	------	----	------	-------	---

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT0001

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Finning (Canada), a division of Finning International Inc.

118 MACDONALD CRESCENT
FORT MCMURRAY, AB T9H 4B2
(780) 743-2218
(780) 791-0584 FAX

Invoice Date 10/06/20
Invoice Number 946859413
Invoice Total \$100.95
Payment Terms NET 60 DAYS
Due Date 09/08/20

Page: 2 (2)

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount	RET1
9		2	5K9090	SEAL O RING	PC	2.38	4.76	N
10		2	6V9746	SEAL-O-RING-	PC	2.17	4.34	N
11		2	6V8397	SEAL	PC	1.88	3.76	N
Package Number		P013050421	Packed Qty	2				
Package Number		P013050421	Packed Qty	2				
Package Number		P013050421	Packed Qty	2				

UNIT# 02-6748, SER# HPD20096, HOLD FOR MORGAN POPL
AR CREEK

Thank you for your business.

Sub-Total 96.14
GST 4.81
Invoice Total CAD \$100.95

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT0001

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1. Returnable Indicator: R for Returnable, N for Non-returnable

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PARTS ORDER CONFIRMATION

Page: 1 (1)

Finning (Canada), a division of Finning International Inc.
118 MACDONALD CRESCENT
FORT MCMURRAY, AB T9H 4B2
(780) 743-2218
(780) 791-0584 FAX

Date 19/11/19
Order Total \$2,497.59
Payment Terms IMMEDIATE
Manual Due Date
Currency CANADIAN DOLLAR
Customer Tax Exemption No.

Sales Person FINNING CANADA

CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
COD-CASH SALES ONLY
17303 102 AVENUE
EDMONTON AB T5S 1J8

Order Date 19/11/19
Customer Reference No. 75599
Order Number 0044668635 / AE1
Finning Quotation Number

CUSTOMER

Requested Delivery Date 19/11/19
Delivery Specifications @BRACER #02-6748

Delivery Method CUSTOMER PICKUP

Delivery Terms Free Carrier (Transport ID)-COL

Ship To
MORGAN CONSTRUCTION
MORGAN CONSTRUCTION FORT HILLS SITE
C/O AE1-FORT MCMURRAY FT. HILLS SITE
FORT MCMURRAY AB T9H 4B2

Make
Model
Serial Number
Legal Land Description (LLD)

Beaked linkage

Line No.	Sub Line	Qty	Item No.	Description	Shipping/ Pickup WHS	U/M	Sales Price	Amount RET
1	2	2285619		BEARING-SLVE	FORT MCMURRAY MAIN WHS	PC	483.53	967.06 R
2	2	3678470		SEAL-LINKAGE	FORT MCMURRAY MAIN WHS	PC	40.97	81.94 N
3	4	3J6216		WASHER	FORT MCMURRAY MAIN WHS	PC	34.34	138.16 R
4	1	320054222		PIN 717-105-495	FORT MCMURRAY MAIN WHS	PC	1,109.24	1,109.24 N
5	2	320054189		DOWEL	FORT MCMURRAY MAIN WHS	PC	24.88	49.76 N
6	2	320054032		SETSCREW/HOLLOW LOCK 0.875XNC	FORT MCMURRAY MAIN WHS	PC	16.25	32.50 N

FINNING D04
118 MACDONALD CRES T9H4B2
FORT MCMURRAY AB
932005212010
6H2233677601

**** PURCHASE ****
11-19-2019 07:55:44
Acct # *****4004 M
Card Type AM

Operator: 123
Trace # 1814
Inv. # 0044668635
Auth # 122858 RRN 001001892

Total \$2,497.59

(000) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

Total \$2,497.59
2,378.66
118.93

resold, transferred, or otherwise disposed of, to any other country or to any person other than the authorized ultimate consignee or end-user(s), either in their original form or after being incorporated into other items, without first obtaining approval from the U.S. government or as otherwise authorized by U.S. law and regulations.
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(346 6161)



PARTS INVOICE

Finning (Canada), a division of Finning International Inc.

MILDRED LAKE INDUSTRIAL PARK HWY 63
MILDRED LAKE, AB TOP 1CO
(780) 790-2010
(780) 791-1557 FAX

Page: 1 (1)

Invoice Date 28/12/19
Invoice Number 94656553
Invoice Total \$851.53
Payment Terms NET 60 DAYS
Due Date 26/02/20
Currency CANADIAN DOLLAR
Customer Tax Exemption No.

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
17303 102 AVENUE
EDMONTON AB T5S 1J8

Order Date 26/12/19
Customer's PO Number 77102
Order Number 0044723206 / AD1 / 30148665
Temp Order Number 0012844136
Finning Quotation Number 0012844136
Purchasing Agent
Customer Contact

CANDREWS@MCEL.CA
28/12/19
Bill of Lading Number 10000010237117326
Delivery Specifications HOLD FOR FORT HILLS PATRICK 02-6748

CUSTOMER
Commitment

Delivery Method CUSTOMER PICKUP

Delivery Terms Free Carrier (Transport ID)-COL

SHIP TO
MORGAN CONSTRUCTION
MORGAN CONSTRUCTION
* FORT HILLS SITE *
MILDRED LAKE AB T9H 3L1

Make

Model

Serial Number

Unit No

Year

Line Sub Inv Qty Item No.

Description

U/M

Sales Price

Extended Amount RET1

2	1	1243296	SPROCKET-TRK 345B	PC	810.98	810.98	R
---	---	---------	-------------------	----	--------	--------	---

Package Number P013415429

Packed Qty 1

Sub-Total 810.98
GST 40.55
Invoice Total CAD \$851.53

Thank you for your business.

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO PO BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT0001

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1. Returnable Indicator: R for Returnable, N for Non-returnable

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(346-6464)



PARTS ORDER CONFIRMATION

Page: 1 (1)

Finning (Canada), a division of Finning International Inc.
MILDRED LAKE INDUSTRIAL PARK HWY 63
MILDRED LAKE, AB TOP 1C0
(780) 790-2010
(780) 791-1557 FAX

Date 16/11/19
Order Total \$1,139.40
Payment Terms IMMEDIATE
Manual Due Date
Currency CANADIAN DOLLAR
Customer Tax Exemption No.

Sales Person FINNING CANADA

CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
COD-CASH SALES ONLY
17303 102 AVENUE
EDMONTON AB T5S 1J8

Order Date 16/11/19
Customer Reference No. 75522
Order Number 0044665901 / AD1
Finning Quotation Number
Requested Delivery Date 16/11/19
Delivery Specifications UNIT 02-6748 / FORT HILLS / BRACER
Delivery Method CUSTOMER PICKUP

CUSTOMER

Commitment

Delivery Terms Free Carrier (Transport ID)-COL

Ship To
MORGAN CONSTRUCTION AND
FORT HILLS SITE
MILDRED LAKE AB T9H 3L1

Make
Model
Serial Number
Legal Land Description (LLD)

Unit No
Year

02-6748

HP D2009Lp

Line No.	Sub Line	Qty	Item No.	Description	Shipping/ Pickup WHS	UM	Sales Price	Amount RET
1	1		BJ9825	SIDECUTTR RH CC09 MILDRED LAKE MAIN WHS	PC		519.10	519.10 R
Approx. branch arrival date: Contact dealer to confirm date.								
2	5		7Y136	BOLT CC09 MILDRED LAKE MAIN WHS	PC		14.70	73.50 R
Approx. branch arrival date: Contact dealer to confirm date.								
3	5		2J3507	NUT CC09 MILDRED LAKE MAIN WHS	PC		5.01	25.05 R
Approx. branch arrival date: Contact dealer to confirm date.								
4	5		3K5234	WASHER CC09 MILDRED LAKE MAIN WHS	PC		5.45	27.25 R
Approx. branch arrival date: Contact dealer to confirm date.								
5	1		5883724	VALVE GPP R MILDRED LAKE MAIN WHS	PC		440.24	440.24 R
Approx. branch arrival date: Contact dealer to confirm date.								

Sub-Total
GST

1,085.14
54.26
\$1,139.40

FINNING D03
116 MACDONALD CRES T9H4B2
FORT MCMURRAY AB
932905216110
GH2264416101

PURCHASE

11-16-2019 17:26:50
Acct # *****4004 M
Card Type AM

Operator: 1234
Trace # 2440
Inv. # 0044665901
Auth # 205434 RRH 001001510
CVD Resp Y

Total \$1,139.40
(000) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

Order delivery note and govern this
from the aforementioned Terms and
shall prevail. These items are controlled
by(ies) herein identified. They may not be
quarantined, either in their original form or
law and regulations.



SERVICE INVOICE

// COPY //

Page: 1 (4)

Finning (Canada), a division of Finning International Inc.

C/O 118 MACDONALD CRESCENT
FORT MCMURRAY, AB T9H 4B2
(780) 743-2218
(780) 791-0584 FAX

Date 11/06/19
Invoice Number 961662160
Invoice Total \$1,183.88
Payment Terms NET 30 DAYS

PAYER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
COD-CASH SALES ONLY
17303 102 AVENUE
EDMONTON AB T5S 1J8

Due Date 11/07/19
Currency CANADIAN DOLLAR

Customer Tax Exemption No.
Customer Reference No. 71164

Order Date 25/01/19
Order Number 0060583493

Finning Contact BILL LANDREE
Customer Contact DAVE LEGGE 1 (587) 785-2557
Customer Commitment Date 06/06/00
Actual Completion Date 31/01/19

Commitment

CUSTOMER LOCATION CA-0000727
MORGAN CONSTRUCTION AND
COD-CASH SALES ONLY
17303 102 AVENUE
EDMONTON AB T5S 1J8

Make CAT
Model 349F
Serial Number HPD20096
Unit Number 02.6748-PD20096
Meter Reading H 1672.00
(25/01/19)

Line No.	Qty	Item No.	Description	U/M	Sales Price
----------	-----	----------	-------------	-----	-------------

10

349F

DPF TRBLSHOOT IN FIELD

Customer Reference No. 71164
WO 1788035 Unit # 02-6748

PO: 71164

Please Note: We are asking the customer to pay this invoice as no warrantable defects in material or workmanship were found. See additional tech notes in complications.

8.5 hrs @ \$205 = \$1742.50

3 hr labour credit for troubleshooting \$615.00-

COMPLAINT: Troubleshoot E1309 (2) Low After treatment #1 SCR
Catalyst Conversion Efficiency

CAUSE: No Issues Found

CORRECTION: Downloaded PSR. Verified DEF gauge indicated

SENT
AUG 01 2019
TO FIELD

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO P.O. BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT0001

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Page: 2 (4)

Finnish (Canada), a division of Finnish International Inc.

C/O 118 MACDONALD CRESCENT
FORT MCMURRAY, AB T9H 4B2
(780) 743-2218
(780) 791-0584 FAX

Date 11/06/19
Invoice Number 961662160
Invoice Total \$1,183.88
Payment Terms NET 30 DAYS

CUSTOMER NUMBER CA-0000727

Due Date 11/07/19

Line No.	Qty	Item No.	Description	U/M	Sales Price
----------	-----	----------	-------------	-----	-------------

tank was full. Performed After treatment system functional test. Partially drained DEF from 100% to 90% to confirm DEF tank header was operating properly and fluid present in tank. Allowed unit to cool down and performed DEF Dosing system verification test. DEF pressure remained at 130PSI. No leaks were found. Completed another After treatment system function test. Cleared logged event codes and returned unit to work.

COMPLICATION: Weather created delay in thaw of unit and access to factory passwords.

There was no parts changed on this unit. After considerable time spent waiting for the unit to exit thawing mode it passed a fuel system verification test and the code "E1309 (2) Low After treatment #1 SCR Catalyst Conversion Efficiency" became logged as opposed to active

3 hours was spent waiting for the unit to exit "DEF Thawing" mode

0.5 Hours was spent waiting for the SCR to cool down to perform a DEF dosing test.

1 Hour was spent traveling to and from the unit and arranging for a driver due to the mine driving requirements

1 Hour was spent waiting for factory passwords

The root cause of the failure was not identified. The only indication of the DEF losing prime was during the after treatment verification test. There was no active or logged codes indicating low DEF pressure. The pressure remained constant at 130 PSI during the DEF Dosing test. The NOX sensor was chosen as a failed part as it triggered the code.

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO P.O. BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801561 RT0001

This invoice is subject to and incorporates by reference the Finnish Terms and Conditions which are attached to the quote and/or delivery note and govern this transaction between Finnish and Customer to the exclusion of all other contractual terms and conditions. In the event of a conflict between the aforementioned Terms and Conditions, this invoice, the order confirmation or any other documentation associated with this transaction, the Terms and Conditions shall prevail.

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(345-6454)



SERVICE INVOICE // COPY //

Page: 3 (4)

Finnling (Canada), a division of Finnling International Inc.

C/O 118 MACDONALD CRESCENT
FORT MCMURRAY, AB T9H 4B2
(780) 743-2218
(780) 791-0584 FAX

Date 11/06/19
Invoice Number 961662160
Invoice Total \$1,183.88
Payment Terms NET 30 DAYS

CUSTOMER NUMBER CA-0000727

Due Date 11/07/19

Line No.	Qty	Item No.	Description	U/M	Sales Price
Repair: 3.0					
Travel: 1.0					
Wait/Escort: 4.5					
5.50	108F-035-	-ACZ-001	JOURNEYMAN FIELD	EA	1,127.50
	108F-035-	-ACZ-001	JOURNEYMAN TRAVEL	EA	
Labor					1,127.50
Service Total					1,127.50
Order total					1,127.50
GST					56.38
Invoice Total					\$1,183.88

Thank you for your business.

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO P.O. BOX 2405, EDMONTON, AB T5J 2S1.
GST/HST Registration Number: 101801661 RT0001

This invoice is subject to and incorporates by reference the Finnling Terms and Conditions which are attached to the quote and/or delivery note and govern this transaction between Finnling and Customer to the exclusion of all other contractual terms and conditions. In the event of a conflict between the aforementioned Terms and Conditions, this invoice, the order confirmation or any other documentation associated with this transaction, the Terms and Conditions shall prevail.

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(345-6464)

Dispute



Preventative Maintenance Checklist

Document No.: FOR-340.6
Revision: R09
Revision Date: 2019-02-26
Owner (Dept): Equipment and Assets

Company: ☒ CRC ☐ Third Party (Name):

Work Order No.:

Mechanic: DAVID STEWART

Unit No.: 006748

Date: June 13/19

Equipment Type: CAT EXCAVATOR 344

Model / Serial No.:

Hour Meter: 5381

Equipment Safety

Pre / Post Delivery	Good		Repair		Pre / Post Delivery	Good			
	Yes	No	Yes	No		Yes	No	Yes	No
General Operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Machine Guarding / Visible Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Test Parking and Service Brakes	<u>N/A</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Carriage / Tires PSI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspect / Grease Driveshafts and U Joints	<u>N/A</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fuel Tank Drain Guarded / Plugged	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible Leaks / Visible Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Positive Air Shut-Off (Check Operation)	<u>N/A</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steering	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lights / Beacons / Flashers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seatbelt	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A/C / Heater / Fans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mirrors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Extinguisher (Date) Bracket	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glass	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	First Aid Kit / Spill Kit / Operator Manual	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Isolation Point for Lockout	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Block Heater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check all Hydraulic Hoses, Lines, and Fittings for Signs of Leaks, Cracks, Wear Spots.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two-Way Radio	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check All Safety Devices (hyd lockouts, park neutral, seat belt cutter, secondary exits and latches)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Back-Up Alarm / <u>Horn</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ice Lugged	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Preventative Maintenance Schedule

Service Type	250hr	500hr	750hr	1000hr	2000hr	Comments
Change Engine Oil Every 500 hrs. SOS Sample Every 250 hrs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Engine Oil Filter (Cut Open and Inspect)		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Change All Fuel Filters (Cut Open and Inspect)		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Drain Water from Fuel Tank and Water Separator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check Air Filters. <u>Change as Required</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check All Oil Levels (Clean Off Magnetic Plugs)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check Coolant Level	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check Belts and Pulleys	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check Cab Air Filter, Replace or <u>Clean</u> <u>After Them too</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Grease Entire Unit	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Transmission Filter (Cut Open and Inspect) (SOS Sample)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Change Hydraulic Filter (Cut Open and Inspect) (SOS Sample)		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Change Swing Drive Oil (SOS Sample)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Change Final Drive Oils (<u>Excavators</u> / <u>Dozers</u>) (SOS Sample) (*1 note)		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Change Winch Oil and Filter (Cut Open and Inspect, (SOS Sample)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Change Transmission Oil and Filters (Cut Open and Inspect, SOS Sample)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Drop and Clean Out Stump Pan (*2 note)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Change Hydraulic Oil (SOS Sample)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Change Pump/Drive (Excavator)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Change Transfer Case Oil (Articulated Equipment)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

Comments: Note: Sample engine oil every 250 hours and all other components every 500 hours.

*1 note: D6 and smaller final drives and excavators - final drives changed at 500 hours. Clean off magnetic plugs
*2 note: Activity to only be completed by mechanics with proper tools and procedures.

Mechanic

DAVID STEWART
Name (Print)

David Stewart
Signature

June 13/19
Date

mailed
 1/20
 2008
 Enailed
 Ft Mcnair
 Enailed

Company: <input type="checkbox"/> CRC <input type="checkbox"/> Third Party (Name):		Unit No.: 02-6748		Work Order No.: FH-0504	
Mechanic: Eric Zachary, Dex		Model / Serial No.: 349F		Date: Dec 13, 18	
Equipment Type: CAT				Hour Meter: 6795	

	Equipment Safety				Pre / Post Delivery			
	Good		Repair		Good		Repair	
	Yes	No	Yes	No	Yes	No	Yes	No
Pre / Post Delivery	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parking Brake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service Brake / Brakes Tested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible Leaks / Visible Damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seatbelt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mirrors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glass	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Block Heater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two-Way Radio	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Back-Up Alarm / Horn	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Service Type	Preventative Maintenance Schedule				Comments
	250hr	500hr	750hr	1000hr	
Change Engine Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Engine Oil Filter (Cut Open and Inspect)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Air Fuel Filters (Cut Open and Inspect)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Drain Water from Fuel Tank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Check Air Filters, Change as Required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	blew out
Check All Oil Levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Check Coolant Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Check Belts and Pulleys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Check Cab Air Filter, Replace or Clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Grease Entire Unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Transmission Filter (Cut Open and Inspect) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Hydraulic Filter (Cut Open and Inspect) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Swing Drive Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sample only
Change Final Drive Oils (Excavators / Dozers) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Winch Oil and Filter (Cut Open and Inspect, SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Transmission Oil and Filters (Cut Open and Inspect, SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Drop and Clean Out Stump Pan (*2 note)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Hydraulic Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Pump/Drive (Excavator)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Change Transfer Case Oil (Articulated Equipment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Comments: Note: Sample engine oil every 250 hours and all other components every 500 hours.

*1 note: Dig and smaller final drives and excavators - final drives changed at 500 hours.

*2 note: Activity is only to be completed by mechanics with proper tools and procedures.

Mechanic	Signature: <i>[Signature]</i>	Date: 12/13/18
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Dec 993 Read Current



PARTS INVOICE

Page: 1 (1)

Finning (Canada), a division of Finning International Inc.

MILDRED LAKE INDUSTRIAL PARK HWY 63
MILDRED LAKE, AB T0P 1C0
(780) 790-2010
(780) 791-1557 FAX

Invoice Date 02/03/19
Invoice Number 945950979

Invoice Total \$779.02
Payment Terms NET 30 DAYS

Due Date 01/04/19
Currency CANADIAN DOLLAR

Customer Tax Exemption No.

Sales Person FINNING CANADA
CUSTOMER NUMBER CA-0000727
MORGAN CONSTRUCTION AND
ENVIRONMENTAL LTD
17303 102 AVENUE
EDMONTON AB T5S 1J8

Order Date 01/03/19
Customer's PO Number 69036

Order Number 0044271388 / AD1 / 27547887
Temp Order Number 0012534227
Finning Quotation Number 0012534227

Purchasing Agent
Customer Contact MCEL.CA 1-709-636-8246

Delivery Date 02/03/19
Bill of Lading Number 10000010216262689
Delivery Specifications HOLD FOR PICKUP FORT HILLS. UNIT 02-

CUSTOMER

Commitment

Delivery Method CUSTOMER PICKUP

SHIP TO

MORGAN CONSTRUCTION
MORGAN CONSTRUCTION
* FORT HILLS SITE *
MILDRED LAKE AB T9H 3L1

Delivery Terms Free Carrier (Transport ID)-COL
Legal Land Description (LLD)

Make
Model
Unit No
Year

Serial Number CHTO 344F LHP020092

Line No.	Sub Line	Inv Qty	Item No.	Description	U/M	Sales Price	Extended Amount
----------	----------	---------	----------	-------------	-----	-------------	-----------------

2	2	300	4610	ROLLER GP TK	PC	370.96	741.92
---	---	-----	------	--------------	----	--------	--------

Package Number P012507694 Packed Qty 2

HOLD FOR PICKUP FORT HILLS. UNIT 02-6748. ATTN. RO
B COWELL

Sub-Total 741.92
GST 37.10
Invoice Total CAD \$779.02

Thank you for your business.

SENT

MAR 04 2019

PAYMENT ADDRESS CHANGE NOTIFICATION: PLEASE REMIT TO BOX 2405, EDMONTON, AB T5J 2S1.

GST/HST Registration Number: 101801561 RT0001

This invoice is subject to and incorporates by reference the Finning Terms and Conditions which are attached to the quote and/or delivery note and govern this transaction between Finning and Customer to the exclusion of all other contractual terms and conditions. In the event of a conflict, between the aforementioned Terms and Conditions, this invoice, the order confirmation or any other documentation associated with this transaction, the Terms and Conditions shall prevail. These items are controlled by the U.S. government and authorized for export only to the country of ultimate destination for use by the ultimate consignee or end-user(s) herein identified. They may not be resold, transferred, or otherwise disposed of, to any other country or to any person other than the authorized ultimate consignee or end-user(s), either in their original form or after being incorporated into other items, without first obtaining approval from the U.S. government or as otherwise authorized by U.S. law and regulations.

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(346-6464)





Preventative Maintenance Checklist

Document No.: FOR-340.B
Revision No.: R09
Revision Date: 2019-02-26
Owner (Dept): Equipment and Assets

Company: ☒ CRC ☐ Third Party (Name):

Work Order No.:

Mechanic: DAVID STEWART

Unit No.: 02.6748

Date: June 13/19

Equipment Type: CAT EXCAVATOR 349

Model / Serial No.:

Hour Meter: 5581

Equipment Safety							
Pre / Post Delivery	Good		Repair		Pre / Post Delivery		Good
	Yes	No	Yes	No			
General Operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Machine Guarding / Visible Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Test Parking and Service Brakes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Carriage / Tires PSI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Inspect / Grease Driveshafts and U Joints	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fuel Tank Drain Guarded / Plugged	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visible Leaks / Visible Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Positive Air Shut-Off (Check Operation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Slewing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lights / Beacons / Flashers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Seatbelt	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A/C / Heater / Fans	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mirrors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Extinguisher (Date) Bracket	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Glass	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	First Aid Kit / Spill Kit / Operator Manual	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Windshield Wipers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Isolation Point for Lockout	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Block Heater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check all Hydraulic Hoses, Lines, and Fittings for Signs of Leaks, Cracks, Wear Spots.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Two-Way Radio	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check All Safety Devices (Hyd lockouts, park neutral, seat belt cutter, secondary exits and latches)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Back-Up Alarm / <u>Horn</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Ice Lugged	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Preventative Maintenance Schedule							
Service Type	250hr	500hr	750hr	1000hr	2000hr	Comments	
Change Engine Oil Every 500 hrs, SOS Sample Every 250 hrs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Change Engine Oil Filter (Cut Open and Inspect)		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
Change All Fuel Filters (Cut Open and Inspect)		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
Drain Water from Fuel Tank and Water Separator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Check Air Filters, <u>Change</u> as Required	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Check All Oil Levels (Clean Off Magnetic Plugs)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Check Coolant Level	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Check Belts and Pulleys	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Check Cab Air Filter, Replace or <u>Clean</u> <u>After 750hr</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Grease Entire Unit	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Change Transmission Filter (Cut Open and Inspect) (SOS Sample)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
Change Hydraulic Filter (Cut Open and Inspect) (SOS Sample)		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
Change Swing Drive Oil (SOS Sample)		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
Change Final Drive Oils (<u>Excavators</u> / <u>Dozers</u>) (SOS Sample) (*1 note)		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
Change Winch Oil and Filter (Cut Open and Inspect, (SOS Sample)				<input type="checkbox"/>	<input type="checkbox"/>		
Change Transmission Oil and Filters (Cut Open and Inspect, SOS Sample)				<input type="checkbox"/>	<input type="checkbox"/>		
Drop and Clean Out Stump Pan (*2 note)				<input type="checkbox"/>	<input type="checkbox"/>		
Change Hydraulic Oil (SOS Sample)				<input type="checkbox"/>	<input type="checkbox"/>		
Change Pump/Drive (Excavator)				<input type="checkbox"/>	<input type="checkbox"/>		
Change Transfer Case Oil (Articulated Equipment)				<input type="checkbox"/>	<input type="checkbox"/>		

Comments: Note: Sample engine oil every 250 hours and all other components every 500 hours.

*1 note: D6 and smaller final drives and excavators - final drives changed at 500 hours. Clean off magnetic plugs
*2 note: Activity to only be completed by mechanics with proper tools and procedures.

Mechanic

DAVID STEWART
Name (Print)

David Stewart
Signature

June 13/19

ENTERED
June 13/19
Page 1 of 1



Preventative Maintenance Checklist

Document No.: FOR-340.5
Revision No.: R05
Revision Date: 2018-09-17
Owner (Dept.): Equipment and Assets

Company: ☐ CRC ☐ Third Party (Name):

Work Order No.: FH-0404

Mechanic: Eric Zachary, DEX

Unit No.: 02-6748

Date: Dec 13, 18

Equipment Type: CAT

Model / Serial No.: 349F

Hour Meter: 1064

Equipment Safety									
Pre / Post Delivery	Good		Repair		Pre / Post Delivery	Good		Repair	
	Yes	No	Yes	No		Yes	No	Yes	No
General Operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Machine Guarding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parking Brake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Carriage / Tires PSI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service Brake / Brakes Tested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fuel Tank Drain Guarded / Plugged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible Leaks / Visible Damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Positive Air Shut-Off (Check Operation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lights / Beacons / Flashers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seatbelt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A/C / Heater / Fans / Block Heaters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mirrors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Extinguisher (Date) Bracket	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glass	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	First Aid Kit / Spill Kit / Operator Manual	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Isolation Point for Lockout	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Block Heater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check all Hydraulic Hoses, Lines, and Fittings for Signs of Leaks, Cracks, Wear Spots.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two-Way Radio	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check All Safety Devices (Hyd Lockouts, park neutral, seat belt cutter, secondary exits and latches)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Back-Up Alarm / Horn	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Preventative Maintenance Schedule

Service Type	250hr	500hr	750hr	1000hr	2000hr	Comments
Change Engine Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Engine Oil Filter (Cut Open and Inspect)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change All Fuel Filters (Cut Open and Inspect)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Drain Water from Fuel Tank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Check Air Filters, Change as Required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Blow out
Check All Oil Levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Check Coolant Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Check Belts and Pulleys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Check Cab Air Filter, Replace or Clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Grease Entire Unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Transmission Filter (Cut Open and Inspect) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Hydraulic Filter (Cut Open and Inspect) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Swing Drive Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Final Drive Oils (Excavators / Dozers) (SOS Sample)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sample only
Change Winch Oil and Filter (Cut Open and Inspect, SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Transmission Oil and Filters (Cut Open and Inspect, SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Drop and Clear Out Stump Pan (*2 note)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Hydraulic Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Pump Drive (Excavator)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Change Transfer Case Oil (Articulated Equipment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Comments: Note: Sample engine oil every 250 hours and all other components every 500 hours.

*1 note: D6 and smaller final drives and excavators - final drives changed at 500 hours.
*2 note: Activity is only to be completed by mechanics with proper tools and procedures.

Mechanic

Eric K

Name (Print)

Signature

Dec 13, 18

Date

ENTERED

CONTACT INFORMATION

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17303 102 AVENUE
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T5S 1J8
PHONE: 7807339100
FAX: 7807339130
Interp By: Greg Eyre

EQUIPMENT

CUSTOMER EQUIP NUM : 02-6748
SERIAL NUMBER : HPD20096
MODEL : 349F
MANUFACTURER : CAT
COMPANY NAME : MORGAN CONSTRUCTION & ENVIRONMENTAL
JOB SITE :
AREA:
REGION:

SAMPLE INFORMATION

COMPARTMENT NAME : HYDRAULIC SYSTEM
COMP SERIAL NUM :
COMPARTMENT MODEL :
LABEL#: 4696100
SHOP JOB NUM :
SAMPLE TYPE: OIL
SAMPLE SHIP TIME (days) : 6
SAMPLE LOCATION :

No Action

DIRT AND WEAR METALS APPEAR TO BE AT ACCEPTABLE LEVELS. OTHER READINGS APPEAR TO BE NORMAL. RESAMPLE AT THE NEXT SERVICE INTERVAL.

LAB #

N030-48284-0909

PROCESS 11-Oct-18

DATE

WEAR/CONTAMINATION - ADDITIVES/FORMULATION

SAMPLE	SAMPLE ID	METER (HR)	METER ON	FLUID	FLUID	FLUID	Na	K	Si	Al	Fe	Cr	Pb	Cu	Sn	Ni	Ag	Ti	V	Zn	Ca	Mg	Ba	B	Mo	P	
05-Oct-18	N030-48284-0909	545	545	FLUID	CHANGE	Y	0	1	4	1	5	0	0	8	0	0	0	0	0	0	871	158	2	0	1	0	683

OIL FORMULATION - OIL CONDITION - OIL CONTAMINATION

SAMPLE	SAMPLE ID	METER (HR)	METER ON	FLUID BRAND	FLUID TYPE	WEIGHT	FLUID	FLUID	V100	V40	VI	ST	OXI	SUL	NIT	A
05-Oct-18	N030-48284-0909	545	545				FLUID	CHANGE	6.9	38.2	142	0	4	12	2	N
DATE	SAMPLE ID	METER (HR)	METER ON	FLUID BRAND	FLUID TYPE	WEIGHT	FLUID	FLUID	V100	V40	VI	ST	OXI	SUL	NIT	A

OIL CLEANLINESS

05-Oct-18	N030-48284-0909	N	Y	20/17/13	8906	789	165	56	23	12	1	0	N
SAMPLE DATE	SAMPLE ID	FLUID CHANGE	FLUID CHANGE	ISO	4µ	6µ	10µ	14µ	18µ	21µ	36µ	50µ	W

A = Antifreeze, Ag = Silver, Al = Aluminum, B = Boron, Ba = Barium, Ca = Calcium, Cr = Chromium, Cu = Copper, Fe = Iron, ISO = ISO Rating, K = Potassium, Mg = Magnesium, Mo = Molybdenum, Ni = Nickel, OXI = Oxidation, P = Phosphorus, Pb = Lead, ST = Soot, SUL = Sulfation, Si = Silicon, Sn = Tin, Ti = Titanium, V = Vanadium, V100 = Viscosity@100C, V40 = Viscosity@40C, VI = Viscosity Index, W = Water, Zn = Zinc

Notice: This analysis is intended as an aid in predicting mechanical wear. No guarantee, expressed or implied, is made against failure of this piece of equipment or a component thereof.



FINNING CANADA LTD. - Fluid Analysis Laboratory, 10910-170th Street, Edmonton, AB, T5S 1H6, CANADA
PHONE: 1-888 FINNING (346-6464)
Email: oilsupport@finning.com Web: www.finning.com

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PHONE: 7807339100
FAX: 7807339130
Interp By: Greg Eyre

EQUIPMENT

CUSTOMER EQUIP NUM : 02-6748
SERIAL NUMBER : HPD20096
MODEL : 349F
MANUFACTURER : CAT
COMPANY NAME : MORGAN CONSTRUCTION & ENVIRONMENTAL
JOB SITE :
AREA:
REGION:

SAMPLE INFORMATION

COMPARTMENT NAME : ENGINE
COMP SERIAL NUM :
COMPARTMENT MODEL :
LABEL#: 4697083
SHOP JOB NUM :
SAMPLE TYPE: OIL
SAMPLE SHIP TIME (days) : 6
SAMPLE LOCATION :

No Action Required

ELEVATED SILICON AND METAL COULD BE DUE TO RESIDUALS FROM BREAK-IN. OTHER READINGS APPEAR TO BE NORMAL.

WEAR/CONTAMINATION - ADDITIVES/FORMULATION																			
SAMPLE	DATE	SAMPLE ID	METER (HR)	METER ON FLUID	FLUID CHANGE	FLITER CHANGE	Na	K	Si	Al	Fe	Cr	Pb	Cu	Sn	Ni	Ag	Ti	V
05-Oct-18	N030-48284-0913	545	250	Y	Y	Y	3	1	23	3	20	0	0	0	663	0	0	0	0
Mo	P	Ba	Mg	Ca	Zn														
4	4	1	66	2020	1117	0	0	0	0	0	0	0	0	0	0	0	0	0	0
913																			

OIL FORMULATION - OIL CONDITION - OIL CONTAMINATION																			
SAMPLE	DATE	SAMPLE ID	METER (HR)	METER ON FLUID	FLUID BRAND	FLUID TYPE	FLUID WEIGHT	FLUID CHANGE	FLITER CHANGE	V100	V40	VI	ST	OXI	SUL	NIT	A	F	PFC
05-Oct-18	N030-48284-0913	545	250	EXXON	SYN	0W-40	Y	Y	Y	11.8	73.0	157	5	19	19	9	N	N	1.41

OIL CLEANLINESS					
SAMPLE	DATE	SAMPLE ID	FLUID CHANGE	FILTER CHANGE	W
05-Oct-18	N030-48284-0913	Y	Y	Y	N

A = Antirazez, Ag = Silver, Al = Aluminum, B = Boron, Ba = Barium, Ca = Calcium, Cr = Chromium, Cu = Copper, F = Fuel, Fe = Iron, K = Potassium, Mg = Magnesium, Mo = Molybdenum, NIT = Nitration, Na = Sodium, Ni = Nickel, OXI = Oxidation, P = Phosphorus, PFC = Percent Fuel Content, Pb = Lead, ST = Soot, SUL = Sulfation, Si = Silicon, Sn = Tin, Ti = Titanium, V = Vanadium, V100 = Viscosity@100C, V40 = Viscosity@40C, VI = Viscosity Index, W = Water, Zn = Zinc

Notice: This analysis is intended as an aid in predicting mechanical wear. No guarantee, expressed or implied, is made against failure of this piece of equipment or a component thereof.

CONTACT INFORMATION

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FAX: 7807339130
Greg Elye
Interp By:

Interp By: Greg Eyre

NEXT SERVICE INTERVAL.

No Action

LAB #
N030-48284-0910
PROCESS 11-Oct-18
DATE

DIRT AND WEAR METALS APPEAR TO BE AT ACCEPTABLE LEVELS, OTHER READINGS APPEAR TO BE NORMAL. RESAMPLE AT THE

EQUIPMENT

CUSTOMER EQUIP NUM : 02-6748
SERIAL NUMBER : HPD20096
MODEL : 349F
MANUFACTURER : CAT
COMPANY NAME : MORGAN CONSTRUCTION & ENVIRONMENTAL L
JOB SITE :
AREA:
REGION:

SAMPLE INFORMATION

COMPARTMENT NAME : SWING DRIVE RIGHT
COMP SERIAL NUM :
COMPARTMENT MODEL :
LABEL# : 4696044
SHOP JOB NUM :
SAMPLE TYPE: OIL
SAMPLE SHIP TIME (days) : 6
SAMPLE LOCATION :

WEAR/CONTAMINATION - ADDITIVES/FORMULATION																											
SAMPLE	DATE	SAMPLE ID	METER (HR)	METER ON FLUID CHANGE	FLUID CHANGE	FILTER CHANGE	Na	K	Si	Al	Fe	Cr	Pb	Cu	Sn	Ni	Ag	Ti	V	Zn	Ca	Mg	Ba	B	Mo	P	
05-Oct-18		N030-48284-0910					3	1	10	3	102	1	0	0	0	0	0	1	0	0	904	3732	12	4	3	1	770

OIL FORMULATION - OIL CONDITION - OIL CONTAMINATION																
SAMPLE	SAMPLE ID	METER	METER ON	FLUID BRAND	FLUID TYPE	FLUID	FLUID	FLUID	FLITER	V100	V40	VI	ST	OXI	SUL	NIT
DATE		(HR)				WEIGHT	CHANGE	CHANGE								
05-Oct-18	N030-10204-0910	545	545					N		11.8	100.3	107	0	3	14	4

OIL CLEANLINESS													
SAMPLE	SAMPLE ID	FLUID	FILTER	ISO	4μ	6μ	10μ	14μ	18μ	21μ	38μ	50μ	W
DATE		CHANGE	CHANGE										
05-Oct-18	N030-10204-0910	N		24/23/20	80166	64702	31522	8719	1722	616	19	3	N

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Ag = Silver, Al = Aluminium, B = Boron, Ba = Barium, Ca = Calcium, Cr = Chromium, Cu = Copper, Fe = Iron, ISO = ISO Rating, K = Potassium, Mg = Magnesium, Mo = Molybdenum, Ni = Nickel, OXI = Oxidation, P = Phosphorus, Pb = Lead, ST = Steel, SUL = Sulfur, Si = Silicon, Sn = Tin, Ti = Titanium, V = Vanadium, V100 = Viscosity@100C, V40 = Viscosity@40C, VI = Viscosity Index, W = Water, Zn = Zinc

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Interp By: Greg Eyre

EQUIPMENT

CUSTOMER EQUIP NUM : 02-6748
SERIAL NUMBER : HPD20096
MODEL : 349F
MANUFACTURER : CAT
COMPANY NAME : MORGAN CONSTRUCTION & ENVIRONMENTAL L
JOB SITE :
AREA:
REGION:

SAMPLE INFORMATION

COMPARTMENT NAME : FINAL DRIVE REAR RIGHT
COMP SERIAL NUM :
COMPARTMENT MODEL :
LABEL#: 4697070
SHOP JOB NUM :
SAMPLE TYPE: OIL
SAMPLE SHIP TIME (days) : 6
SAMPLE LOCATION :

No Action

DIRT AND WEAR METALS APPEAR TO BE AT ACCEPTABLE LEVELS. OTHER READINGS APPEAR TO BE NORMAL. RESAMPLE AT THE NEXT SERVICE INTERVAL.

Required

LAB #

N030-48284-0915

PROCESS

11-Oct-18

DATE

WEAR/CONTAMINATION - ADDITIVES/FORMULATION

SAMPLE	DATE	SAMPLE ID	METER (HR)	METER ON	FLUID	FLUID	FLUID	Na	K	SI	Al	Fe	Cr	Pb	Cu	Sn	Ni	Ag	Ti	V	Zn	Ca	Mg	Ba	B	Mo	P	
05-Oct-18		N030-48284-0915	545	545	Y		CHANGE	1	9	9	2	104	0	0	1	0	0	0	0	0	0	1279	3111	11	2	2	0	993

OIL FORMULATION - OIL CONDITION - OIL CONTAMINATION

SAMPLE	SAMPLE ID	METER	(HR)	METER ON	FLUID BRAND	FLUID TYPE	FLUID	WEIGHT	CHANGE	FLUID	CHANGE	FLUID	VI100	V40	VI	ST	OXI	SUL	NIT
05-Oct-18	N030-48284-0915	545	545	EXXON	ALL TRANS	30	Y	CHANGE	CHANGE	CHANGE	CHANGE	CHANGE	11.7	101.7	103	0	3	16	4

OIL CLEANLINESS

05-Oct-18	N030-48284-0915	Y		24/23/21	80080	65961	34639	10494	1860	580	16	3	N
SAMPLE	SAMPLE ID	FLUID	CHANGE	ISO	4µ	6µ	10µ	14µ	18µ	21µ	38µ	50µ	W

Ag = Silver, Al = Aluminum, B = Boron, Ba = Barium, Ca = Calcium, Cr = Chromium, Cu = Copper, Fe = Iron, ISO = ISO Rating, K = Potassium, Mg = Magnesium, Mo = Molybdenum, NIT = Nitrogen, Ni = Nickel, OXI = Oxidation, P = Phosphorus, Pb = Lead, ST = Soot, SUL = Sulfation, SI = Silicon, Sn = Tin, Ti = Titanium, V = Vanadium, V100 = Viscosity@100C, V40 = Viscosity@40C, VI = Viscosity Index, W = Water, Zn = Zinc

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EQUIPMENT

CUSTOMER EQUIP NUM : 02-6748
SERIAL NUMBER : HPD20096
MODEL : 349F
MANUFACTURER : CAT
COMPANY NAME : MORGAN CONSTRUCTION & ENVIRONMENTAL L
JOB SITE :
AREA:
REGION:

SAMPLE INFORMATION

COMPARTMENT NAME : SWING DRIVE LEFT
COMP SERIAL NUM :
COMPARTMENT MODEL :
LABEL#: 4696083
SHOP JOB NUM :
SAMPLE TYPE: OIL
SAMPLE SHIP TIME (days) : 6
SAMPLE LOCATION :

Monitor
Compartment

UNABLE TO TEST FOR PARTICLE COUNT (ISO CODE) DUE TO EXCESS VISIBLE METAL PARTICULATE: LIKELY RELATED TO BREAK-IN,
DIRT AND WEAR METALS APPEAR TO BE AT ACCEPTABLE LEVELS. OTHER READINGS APPEAR TO BE NORMAL. RESAMPLE AT THE
NEXT SERVICE INTERVAL. CONFIRM SOURCE OF VISIBLE METAL IN SAMPLE.

LAB #

N030-48284-0911

PROCESS

11-Oct-18

DATE

WEAR/CONTAMINATION - ADDITIVES/FORMULATION

SAMPLE	SAMPLE ID	METER	(HR.)	METER ON	FLUID	FLUID	FLUID	Na	K	Si	Al	Fe	Cr	Pb	Cu	Sn	Ni	Ag	Ti	V	Zn	Ca	Mg	12	3	2	1	795
DATE		METER		METER ON	FLUID	CHANGE	CHANGE																					
05-Oct-18	N030-48284-0911	545	545	N				3	1	8	3	97	1	0	1	0	0	0	0	0	0	943	3908	12	3	2	1	795

OIL FORMULATION - OIL CONDITION - OIL CONTAMINATION

SAMPLE	SAMPLE ID	METER	(HR.)	METER ON	FLUID BRAND	FLUID TYPE	FLUID	FLUID	FLUID	FLITER	V100	V40	VI	ST	OXI	SUL	NIT
DATE		METER		METER ON	FLUID BRAND	FLUID TYPE	FLUID	WEIGHT	CHANGE	CHANGE							
05-Oct-18	N030-48284-0911	545	545								11.7	101.0	104	0	3	14	4

OIL CLEANLINESS

SAMPLE	SAMPLE ID	FLUID	CHANGE	FLITER	ISO	PC	W
DATE		CHANGE		CHANGE		Rating	
05-Oct-18	N030-48284-0911	N			METAL	A3	N

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Preventative Maintenance Checklist

Document No.: FOR-340-B
Revision No.: R05
Revision Date: 2018-01-19
Owner (Dep.): Equipment and Assets

Company: <input checked="" type="checkbox"/> CRC <input type="checkbox"/> Third Party (Name):	Job No.: 6700
Mechanic: <u>Brad Redmond Young S.S.C</u>	Unit No.: 02-6748
Equipment Type: <u>4T Excavator</u>	Model / Serial No.: 349
	Date: <u>July 26/18</u>
	Hour Meter: <u>224</u>

Pre / Post Delivery	Good		Repair		Pre / Post Delivery	Good		Repair	
	Yes	No	Yes	No		Yes	No	Yes	No
General Operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Machine Guarding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parking Brake	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Under Carriage / Tires PSI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service Brake / Brakes Tested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fuel Tank Drain Guarded / Plugged	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible Leaks / Visible Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Positive Air Shut-Off (Check Operation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lights / Beacons / Flashers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seatbelt	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A/C / Heater / Fans / Block Heaters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mirrors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Extinguisher (Date) Bracket	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glass	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	First Aid Kit / Spill Kit / Operator Manual	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Isolation Point for Lockout	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Block Heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check all Hydraulic Hoses, Lines, and Fittings for Signs of Leaks, Cracks, Wear Spots.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two-Way Radio	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check All Safety Devices (tyd lockouts, park neutral, seat belt cutter, secondary exits and latches)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Back-Up Alarm / Horn	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Service Type	250hr		500hr		750hr		1000hr		2000hr		Comments
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
Change Engine Oil (SOS Sample)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Engine Oil Filter (Cut Open and Inspect)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change All Fuel Filters (Cut Open and Inspect)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Drain Water from Fuel Tank	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check Air Filters, Change as Required	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check All Oil Levels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check Coolant Level	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check Belts and Pulleys	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check Cab Air Filter, Replace or Clean	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Grease Entire Unit	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Transmission Filter (Cut Open and Inspect) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Hydraulic Filter (Cut Open and Inspect) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Swing Drive Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Final Drive Oils (Excavators / Dozers) (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Winch Oil and Filter (Cut Open and Inspect, (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Transmission Oil and Filters (Cut Open and Inspect, SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Drop and Clean Out Stump Pan (*2 note)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Change Hydraulic Oil (SOS Sample)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments: Note: Sample engine oil every 250 hours and all other components every 500 hours.

*1 note: D6 and smaller final drives and excavators - final drives changed at 500 hours.

*2 note: Activity to only be completed by mechanics with proper tools and procedures.

Mechanic: <u>Brad Redmond</u>	Signature: <u>[Signature]</u>	Date: <u>July 26/18</u>
Name (Print)		