



Rescue Kit Test Report Schedule
Technical Evaluation for Fall Arrest System

Document Identifier:	240-171000577_1_D	Rev 1
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Enquiry Number: Bidder Name: Bidder CSD Number:

In the provided box, tick the group of SAP numbers to which this Test Schedule is applicable. The test reports are required and must be submitted with this test schedule, for the selected **group** of SAP numbers listed on this sheet.

RESCUE SYSTEM WORKING FROM HEIGHT D12703	217951	<input type="checkbox"/>	<i>tick here if offered units in this group of SAP numbers</i>
RESCUE EQUIPMENT/KIT D12704	249906 249907	<input type="checkbox"/>	<i>tick here if offered units in this group of SAP numbers</i>

1	2	3	4	5
Item	Component Description (Manufacturer and Model No.)	SANS Standard	Report No.	Complies to test Requirements Y/N?
2.1				
2.2				
2.3				
2.4				
2.5				
2.6				
2.7				
2.8				
2.9				

Bidder/Supplier Signature _____ Name (Print) _____ Signature _____ Date _____

Approved by: Noxolo Mabula
Job Title: Manager Technical Support
Date 26 Jun 2026 