




## Lifting Accessories of Visual and Thorough Examination

This Certificate complies with the requirements of the Lifting Equipment Operations and Lifting Equipment Regulations

Client:	EMC Company	Certificate no:	QC-B-03-25-0077/05/01
Location:	8 TH STATION	Job Order No.:	QC-B-03-25-0077
Date of Examination:	08-Mar-2025	Next Inspection Due:	07-Sep-2025
Last Inspection		Last Proof Load Test Date	
12-Sep-2024		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL
2203323 2203324 2203325 220317	<p><b>Vertical Plate Lifting Clamp</b></p> <p>Manufacturer: Gription</p> <p>Jaw Opening: 0-40 mm</p> <p>Safety Factor: 4:1</p> 	04	3 Ton
Reference Standard:	BS EN 13155:2003 + A2:2009 / EN:12195		

Is this the first examination after Installation or assembly at a new site or location?	YES		NO	<input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? With an interval of 12 months? By an examination scheme? After the occurrence of exceptional circumstances?	YES	<input checked="" type="checkbox"/>	NO			
						YES		NO	<input checked="" type="checkbox"/>		
If the answer to the above question is YES has the equipment been installed correctly?	YES		NO			YES	<input checked="" type="checkbox"/>	NO			
						YES		NO	<input checked="" type="checkbox"/>		
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none state NONE) <b>NONE</b>											
Is the above a defect which is of immediate danger to persons:								YES		NO	<input checked="" type="checkbox"/>
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)						N/A					
Particulars of any repair, renewal, or alteration required to remedy the defect identified above:											
Particulars of any tests carried out as part of the examination: (If none state NONE) The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory											
<b>IS THIS EQUIPMENT SAFE TO OPERATE?</b>								YES	<input checked="" type="checkbox"/>	NO	

LEEA & ASNT Level II Inspector Name:	Signature	Authenticating This Report:	Signature
Khaled Mahmoud		Mohamed Abdulla	

**THIS IS TO CERTIFY THAT:** a competent person did attend the owner mentioner's work location on the date shown above and the Equipment described in this report was tested & inspected as per the requirements of Lifting Operations Lifting Equipment Regulation "LOLER". The result was found Satisfactory at the time of Inspection and considered Safe for Lifting.