

**AI TAKAMUL COMPANY FOR ENGINEERING TESTS  
AND PROFESSIONAL SAFETY LIMITED**

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**CERTIFICATE OF THOROUGH EXAMINATION**

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

<b>Date of Examination:</b>	27-11-2023	<b>Date of Report:</b>	27-11-2023	<b>Certificate No:</b>	QC-23-11/HH-21-CT-149		
<b>Client Name:</b>	Hong Hua Oil& Gas Engineering Services Ltd	<b>Location:</b>	ATS YARD	<b>Job Number:</b>	QC-23-11/HH-21		
<b>Serial Number:</b>	<b>QTY</b>	<b>Description</b>	<b>SWL</b>	<b>Date of manufacture if known:</b>	<b>Date of last thorough examination</b>		
S587	1	<b>4 LEG WIRE ROPE SLING</b>  <b>MANUFACTURER:</b> SAFETY MARINE <b>DIM:</b> 5 Mtr (L) X 28 MM (DIA) <b>FOS:</b> 5:1  IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE C/W MASTER LINK ASSEMBLY AT TOP HARD EYE BOTH END	21 TON	N/A	25-08-2023		
<b>Reference Standard:</b>	BS EN 13414-1 /HAL DOC: ST-GL-HAL-HSE-0420						
Is this the first examination after Installation or assembly at a new site or location?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months?		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input type="checkbox"/>	With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
			In accordance with an examination scheme?		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
			After the occurrence of exceptional circumstances?		YES <input type="checkbox"/> 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) NONE							
Is the above a defect which is of immediate danger to persons:				YES <input type="checkbox"/>	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 <input type="checkbox"/>		
<b>Name of Inspector:</b>	<b>Name of person authenticating this report:</b>		<b>Signature &amp; Stamp:</b>				
AIZAZ FARHAT	ASHRAF ELSAID						
<b>Date of Next Through Examination:</b>	26.05.2024						

REV: 01 Dated: 20 June 2022

**THIS IS TO CERTIFY THAT;** a competent person did attend the above-mentioned owner'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.

