

Al Takamul Company for Engineering Services Quality Control – Iraq



CERTIFICATE OF THOROUGH EXAMINATION

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

| Client Name: | Al- ka | arrar Enginee | ring Company | Certificate No: | QC-J-4-2024-0027/02 | |
|----------------------|------------|---------------|--------------|-----------------|---------------------|--|
| Date of Examination: | 13.04.2024 | Location: | QC Yard | Job Number: | QC-J-4-2024-0027 | |

| Serial Number: | QTY | | Description | SWL | Date of last Thorough examination | | | | |
|---|-----------|-----------------------|---|---|-----------------------------------|-----|------------|----|-------------|
| 08054400017 08054400068 | 02 | Manufact Date of M | ctor: 7:1 M | Vertical 4000 Kg Chocker 3200 Kg Basket 8000 Kg | NEW | | | | |
| Reference Standar | d: | BS EN 1492-1:2008 | | | | | | | |
| Is this the first examination after Installation or assembly at a new site or location? If the answer to the above question is YES has the | | | YES NO √ Within With a YES NO In accordance | Was the examination carried out: Within an interval of 6 months? With an interval of 12 months? In accordance with an examination schem After the occurrence of exceptional | | | ES VES VES | NO | \ \ \ |
| 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 Sate | | | | | | | | | |
| NONE) NONE | s of imme | diate danger | to nersons: | | | YES | 1 | NO | √ |
| Is the above a defect which is of immediate danger to persons: Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when) | | | | | | | | | |
| 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 | | | | | | | | | |
| IS THIS EQUIPMENT SAFE TO | OPERATI | E? | | | | YES | 1 | NO | |

| ASNT Level II Inspector Name: | Authenticating This Report: | Signature & Stamp: | Date of Next Through Examination: |
|-------------------------------|-----------------------------|--------------------|-----------------------------------|
| Aizaz Faraht | Mohamed Abdulla | | 12.10.2024 |

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.



















