




CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-01
Serial Number:	QTY	Description		SWL	Date of last thorough examination
M2351 M2334 M2337 M2325 M2357 M2349	06	SINGLE LEG WIRE ROPE SLINGE 13 mm Diameter, 1.5 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store		2.1 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
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"/> 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"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input 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)				YES by:	
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 OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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




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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-02		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
M2360 M2363 M2372 M2375 M2368 M2377 M2361 M2362 M2366 M2373 M2365 M2379 M2367	13	SINGLE LEG WIRE ROPE SLINGE 13 mm Diameter, 2 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store			2.1 Ton	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
Is this the first examination after Installation or assembly at a new site or location?		YES		NO		✓	
If the answer to the above question is YES has the equipment been installed correctly?		YES		NO		✓	
Was the examination carried out:		Within an interval of 6 months?		YES		✓	
		With an interval of 12 months?		YES		✓	
In accordance with an examination scheme?		YES		✓		NO	
After the occurrence of exceptional circumstances?		YES		✓		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 State NONE) NONE							
Is the above a defect which is of immediate danger to persons:						YES	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)						YES by:	
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 OPERATE?						YES	

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Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-03
Serial Number:	QTY	Description		SWL	Date of last thorough examination
L1196 L1202 L4209 L2001	04	SINGLE LEG WIRE ROPE SLINGE 13 mm Diameter, 2 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store		2 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
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"/> 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"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input 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)				YES by:	
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 OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-04
Serial Number:	QTY	Description		SWL	Date of last thorough examination
I6453 I6449 I6451	03	SINGLE LEG WIRE ROPE SLINGE 13 mm Diameter, 1.5 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store		2 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √		Was the examination carried out: Within an interval of 6 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ With an interval of 12 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ After the occurrence of exceptional circumstances? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input 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:				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input 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)				YES by:	
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) <i>The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory</i>					
IS THIS EQUIPMENT SAFE TO OPERATE?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √	

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-05		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
I4182 I4183	02	SINGLE LEG WIRE ROPE SLINGE 13 mm Diameter, 4 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store			2 Ton	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
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"/>	
				With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" 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"/>		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)						YES by:	
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 OPERATE?						YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-06
Serial Number:	QTY	Description		SWL	Date of last thorough examination
16446	01	SINGLE LEG WIRE ROPE SLINGE 13 mm Diameter, 1.3 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store		2 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
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"/> 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"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input 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)				YES by:	
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Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-07
Serial Number:	QTY	Description		SWL	Date of last thorough examination
19276 19217	02	SINGLE LEG WIRE ROPE SLINGE 18 mm Diameter, 3 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store		4.3 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
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"/> 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"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input 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"/>
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IS THIS EQUIPMENT SAFE TO OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-08		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
H7860	01	SINGLE LEG WIRE ROPE SLINGE 18 mm Diameter, 1.3 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store			4.3 Ton	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
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"/>	
				With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" 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"/>		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)				YES by:			
Particulars of any repair, renewal or alteration required to remedy the defect identified above:							
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IS THIS EQUIPMENT SAFE TO OPERATE?						YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-09		
Serial Number:	QTY	Description		SWL	Date of last thorough examination		
L722 L728 L738 L735 L731 L729 L794 L720	08	SINGLE LEG WIRE ROPE SLINGE 38 mm Diameter, 9 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Soft Eye X Soft Eye. Manufacture: Liftek FOS: 5:1 Location: Store		16.7 Ton	16.11.2023		
Reference Standard:		BS EN 13414-1/2					
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:		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
				Within an interval of 6 months?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
				With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" 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"/>		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)						YES by:	
Particulars of any repair, renewal or alteration required to remedy the defect identified above:							
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Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-10
Serial Number:	QTY	Description		SWL	Date of last thorough examination
M2224	01	SINGLE LEG WIRE ROPE SLINGE 36 mm Diameter, 8.5 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Soft Eye X Soft Eye. Manufacture: Liftek FOS: 5:1 Location: Store		16.7 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
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"/> 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"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input 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)				YES by:	
Particulars of any repair, renewal or alteration required to remedy the defect identified above:					
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IS THIS EQUIPMENT SAFE TO OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-11
Serial Number:	QTY	Description		SWL	Date of last thorough examination
M2514 M2515 M2516 M2517	04	SINGLE LEG WIRE ROPE SLINGE 44 mm Diameter, 10 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Soft Eye X Soft Eye. Manufacture: Liftek FOS: 5:1 Location: Store		24.8 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √		Was the examination carried out: Within an interval of 6 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ With an interval of 12 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ After the occurrence of exceptional circumstances? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input 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:				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input 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)				YES by:	
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) <i>The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory</i>					
IS THIS EQUIPMENT SAFE TO OPERATE?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √	

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Thorough Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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






CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-12
Serial Number:	QTY	Description		SWL	Date of last thorough examination
16450	01	SINGLE LEG WIRE ROPE SLINGE 13 mm Diameter, 1.5 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store		2 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
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"/> 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"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input 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)				YES by:	
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 OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-13
Serial Number:	QTY	Description		SWL	Date of last thorough examination
M2601 M2602	02	SINGLE LEG WIRE ROPE SLINGE 44 mm Diameter, 1.8 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store		24.8 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √		Was the examination carried out: Within an interval of 6 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ With an interval of 12 months? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> √ In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ After the occurrence of exceptional circumstances? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> √	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input 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:				<input type="checkbox"/> 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)				YES by:	
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) <i>The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory</i>					
IS THIS EQUIPMENT SAFE TO OPERATE?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> √ <input type="checkbox"/> NO <input type="checkbox"/>	

REV: 01 Dated: 20 June 2022

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Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-14		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
B3148	02	SINGLE LEG WIRE ROPE SLINGE 13 mm Diameter, 8 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Soft Eye X Soft Eye. Manufacture: Liftek FOS: 5:1 Location: Store			2 Ton	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
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:		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
				Within an interval of 6 months?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
				With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" 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"/>		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)						YES by:	
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 OPERATE?						YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-15
Serial Number:	QTY	Description		MBL	Date of last thorough examination
17884 17300 M2508 M2507	04	SINGLE LEG WIRE ROPE SLINGE 24 mm Diameter, 10 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Plain. Manufacture: Liftek FOS: 5:1 Location: Store		338 KN	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √		Was the examination carried out: Within an interval of 6 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ With an interval of 12 months? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> √ In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ After the occurrence of exceptional circumstances? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> √	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input 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:				<input type="checkbox"/> 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)				YES by:	
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) <i>The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory</i>					
IS THIS EQUIPMENT SAFE TO OPERATE?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> √ <input type="checkbox"/> NO <input type="checkbox"/>	

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-16
Serial Number:	QTY	Description		SWL	Date of last thorough examination
B3329 B3330	02	<p>SINGLE LEG WIRE ROPE SLINGE</p> <p>22 mm Diameter, 10 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Plain. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>		5.65 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √		Was the examination carried out: Within an interval of 6 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ With an interval of 12 months? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> √ In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ After the occurrence of exceptional circumstances? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> √	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input 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)				YES by:	
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 OPERATE?				YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/> √

REV: 01 Dated: 20 June 2022

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Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-17		
Serial Number:	QTY	Description			MBL	Date of last thorough examination	
M1357	01	SINGLE LEG WIRE ROPE SLINGE 20 mm Diameter, 120 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Plain. Manufacture: Liftek FOS: 5:1 Location: Store			252 KN	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
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"/>	
				With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" 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"/>		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)						YES by:	
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 OPERATE?						YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

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Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-18
Serial Number:	QTY	Description		SWL	Date of last thorough examination
M2510 M2511	02	SINGLE LEG WIRE ROPE SLINGE 19 mm Diameter, 2.5 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Hard Eye. Manufacture: Liftek FOS: 5:1 Location: Store		4.6 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √		Was the examination carried out: Within an interval of 6 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ With an interval of 12 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √ After the occurrence of exceptional circumstances? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input 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:				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input 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)				YES by:	
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 OPERATE?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √	

REV: 01 Dated: 20 June 2022

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Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-19
Serial Number:	QTY	Description		SWL	Date of last thorough examination
B6898 B6893 B6896 B6895	04	SINGLE LEG WIRE ROPE SLINGE 13 mm Diameter, 8 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Soft Eye X Soft Eye. Manufacture: Liftek FOS: 5:1 Location: Store		2.1 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
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"/> 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"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input 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)				YES by:	
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 OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

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Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd		Job Number:	QC-HH-04-24-0135	
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-20
Serial Number:	QTY	Description		SWL	Date of last thorough examination
17117	01	SINGLE LEG WIRE ROPE SLINGE 24 mm Diameter, 3 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1 Location: Store		6.7 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
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"/> 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"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input 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)				YES by:	
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 OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-21
Serial Number:	QTY	Description		SWL	Date of last thorough examination
L1171 L1172	02	SINGLE LEG WIRE ROPE SLINGE 38 mm Diameter, 2 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE. Soft Eye X Soft Eye. Manufacture: Liftek FOS: 5:1 Location: Store		16.7 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
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"/> 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"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/> NO <input 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)				YES by:	
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 OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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






CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-22		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
M2394 M2395	02	<p>TOW LEG WIRE ROPE SLINGE</p> <p>26 mm Diameter, 8 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPliced WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>			12 Ton	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
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"/>	
				With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" 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"/>		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)						YES by:	
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 OPERATE?						YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-23		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
M2393	01	<p>TOW LEG WIRE ROPE SLINGE</p> <p>26 mm Diameter, 5 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPICED WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>			12 Ton	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
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"/>	
				With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" 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"/>		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)						YES by:	
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 OPERATE?						YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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




CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-24
Serial Number:	QTY	Description		SWL	Date of last thorough examination
M2388 M2389 M2391 M2392 M3290	05	<p>TOW LEG WIRE ROPE SLINGE</p> <p>22 mm Diameter, 6.9 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPICED WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>		8.7 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		Was the examination carried out:	
				Within an interval of 6 months?	
				With an interval of 12 months?	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>		In accordance with an examination scheme?	
				After the occurrence of exceptional circumstances?	
				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input 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)				YES by:	
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 OPERATE?				YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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




CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-25		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
M2595 M2596	02	<p>TOW LEG WIRE ROPE SLINGE</p> <p>32 mm Diameter, 6 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPliced WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>			18.3 Ton	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
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"/>	
				With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" 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"/>		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)						YES by:	
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 OPERATE?						YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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






CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd		Job Number:	QC-HH-04-24-0135	
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-26
Serial Number:	QTY	Description		SWL	Date of last thorough examination
M2591 M2592 M2581 M2582 M2590 M2587 M2588 M2589 M2583 M2584 M2585 M2586	12	<p>TOW LEG WIRE ROPE SLINGE</p> <p>28 mm Diameter, 8 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>		14 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		YES	NO	✓	
If the answer to the above question is YES has the equipment been installed correctly?		YES	NO	✓	
Was the examination carried out:					
Within an interval of 6 months?		YES	✓	NO	✓
With an interval of 12 months?		YES	✓	NO	✓
In accordance with an examination scheme?		YES	✓	NO	✓
After the occurrence of exceptional circumstances?		YES	✓	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 state NONE) NONE					
Is the above a defect which is of immediate danger to persons:				YES	NO
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				YES by:	
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 OPERATE?				YES	NO

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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





CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029
Certificate No:	QC-HH-04-24-0135-10-27		

Serial Number:	QTY	Description	SWL	Date of last thorough examination
M2597 M2599 M2600	03	<p>TOW LEG WIRE ROPE SLINGE</p> <p>36 mm Diameter, 9 M Length, Const.6x36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>	25.9 Ton	16.11.2023

Reference Standard:	BS EN 13414-1/2		
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Is this the first examination after Installation or assembly at a new site or location?	YES	NO	✓	Was the examination carried out: Within an interval of 6 months?	YES	✓	NO	
					With an interval of 12 months?	YES		NO
If the answer to the above question is YES has the equipment been installed correctly?	YES	NO		In accordance with an examination scheme? After the occurrence of exceptional circumstances?	YES	✓	NO	
					YES		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 state NONE) **NONE**

Is the above a defect which is of immediate danger to persons: YES ☐ NO ☒


Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when) YES by: ☐

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 OPERATE? YES ☒ NO ☐

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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




CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-28
Serial Number:	QTY	Description		SWL	Date of last thorough examination
M2593 M2594	02	<p>TOW LEG WIRE ROPE SLINGE</p> <p>32 mm Diameter, 6 M Length, Const.6x36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>		18.3 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		YES	NO	✓	
If the answer to the above question is YES has the equipment been installed correctly?		YES	NO		
		Was the examination carried out: Within an interval of 6 months? With an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?		YES	✓
				YES	✓
				YES	✓
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	NO
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				YES by:	
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 OPERATE?				YES	NO

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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






CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd		Job Number:	QC-HH-04-24-0135	
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-29
Serial Number:	QTY	Description		SWL	Date of last thorough examination
M2593 M2594	02	<p>TOW LEG WIRE ROPE SLINGE</p> <p>32 mm Diameter, 6 M Length, Const.6x36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>		18.3 Ton	16.11.2023
Reference Standard:		BS EN 13414-1/2			
Is this the first examination after Installation or assembly at a new site or location?		YES	NO	✓	
If the answer to the above question is YES has the equipment been installed correctly?		YES	NO		
		Was the examination carried out: Within an interval of 6 months? With an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?		YES	✓
				NO	✓
				NO	✓
				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 state NONE) NONE					
Is the above a defect which is of immediate danger to persons:				YES	NO
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				YES by:	
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 OPERATE?				YES	NO

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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






CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-30		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
M2380 M2381 M2382 M2383	03	<p>FOUR LEG WIRE ROPE SLINGE</p> <p>13 mm Diameter, 7.2 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPliced WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>			4.4 Ton	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
Is this the first examination after Installation or assembly at a new site or location?				<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		Was the examination carried out:	
						<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
If the answer to the above question is YES has the equipment been installed correctly?				<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>		Within an interval of 6 months? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
						With an interval of 12 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
						In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
						After the occurrence of exceptional circumstances? <input type="checkbox"/> 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:						<input type="checkbox"/> 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)						YES by:	
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 OPERATE?						<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Thorough Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

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






CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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

Client Name:	Hong Hua Oil& Gas Engineering Services Ltd			Job Number:	QC-HH-04-24-0135		
Date of Examination:	28.04.2024	Location:	HH Rig 029	Certificate No:	QC-HH-04-24-0135-10-31		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
M2384 M2385 M2386 M2387	04	<p>FOUR LEG WIRE ROPE SLINGE</p> <p>13 mm Diameter, 9.2 M Length, Const.6×36, IWRC, RHO, Galv Steel IWRC, MECHANICALLY SPliced WITH ALUMINUM FERRULE C/W MASTER LINK. Hard Eye X Soft Eye. Manufacture: Liftek FOS: 5:1</p> <p>Location: Store</p>			4.4 Ton	16.11.2023	
Reference Standard:		BS EN 13414-1/2					
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"/>	
				With an interval of 12 months?		YES <input type="checkbox"/> NO <input checked="" 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"/>		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)						YES by:	
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 OPERATE?						YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Khaled Mahmoud	Mohamed Abdulla		27.10.2024

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned work location on the date shown above and the equipment described in this report was tested & inspected as per the requirements of Lifting Operation Lifting Equipment Regulation "LOLER". The result was found Satisfactory at the time of Inspection and considered Safe for Lifting.

