

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

Basra, North Rumaila, Quality Control Yard - Iraq

Tel: +9647834966105 / +9647834964657

Email: ashraf.said@qualitycontrol-iraq.com / hany.akafi@qualitycontrol-iraq.com



**CERTIFICATE OF THOROUGH EXAMINATION**

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

<b>Date of Examination:</b>	<b>08/06/2024</b>	<b>Date of Report:</b>	<b>08/06/2024</b>	<b>Certificate No:</b>	<b>QC-24-WPS-0806-026</b>								
<b>Client Name:</b>	<b>HALLIBURTON</b>	<b>Location:</b>	<b>WPS</b>	<b>Job Number:</b>	<b>080624</b>								
<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>								
<b>E 1340</b>	<b>1</b>	<b>4 LEG WIRE ROPE SLING</b> <b>DIM: 4.00 ft (L) X 13 MM (DIA)</b> <b>MANUFACTURER: SAFETY MARINE</b>  <b>IWRC MECHANICALLY SPLICED WITH ALUMINUM FERRULES C/W MASTER LINK ASSEMBLY AT THE TOP</b>  <b>HARD EYE BOTH ENDS</b> <b>S.F: 5:1</b>	<b>4.4 T</b>	<b>N/A</b>	<b>27/12/2023</b>								
<b>Reference Standard:</b>	<b>BS EN 13414-1/ HAL DOC: ST-GL-HAL-HSE-0420</b>												
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? With an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?	YES	✓	NO	✓				
If the answer to the above question is YES has the equipment been installed correctly?		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) <b>NONE</b>													
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)							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) <b>The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory</b>													
<b>IS THIS EQUIPMENT SAFE TO OPERATE?</b>							YES	✓	NO				
<b>Name of Inspector:</b>	<b>Name of person authenticating this report:</b>		<b>Client Signature &amp; Stamp:</b>										
<b>ASHRAF ELSAID</b>	<b>MOHAMED ABDALLAH</b>		<b>ALI Talib HB48903</b> <b>Date: 09/06/2024</b> <b>Signature</b>										
<b>Date of Next Through Examination:</b>	<b>07/12/2024</b>		<b>Haliburton</b>										

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.

