

AL TAKAMUL COMPANY FOR ENGINEERING TESTS AND PROFESSIONAL SAFETY LIMITED

Basra, North Rumaila, Quality Control Yard - Iraq

Tel: +9647810009138 / +9647834964657

Email: OP@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

Date of Examination:	08/06/2024	Date of Report:	08/06/2024	Certificate No:	QC-24-WPS-0806-029
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	080624
Last Inspection		Last Proof Load Test Date		Next Proof Load Test Due	
27/12/2023		27/12/2023		26/12/2025	
Serial Number:	QTY	Description			
L-690598 AEME 11D025 SAP NO: 11912828	1	MAIN FRAME DIM: 3.5 M (L) X 1.27 M (W) X 1.70 M (H) FULLY WELDED STEEL STRUCTURE WITH TOP FOUR MOUNTED LIFTING POINTS TARE WEIGHT: 1200 KG PAYLOAD: 3250 KG M.G.W: 4450 KG			
Reference Standard:	BS 7072/ HAL DOC: WM-GL-HAL-HSE-0420				
Pad Eyes Dimension:	Thickness:	Pin Hole:	Length:	Height:	
	30 mm	29 mm	70 MM	68 MM	
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"/> Within 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)				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					
** MPI was carried out on the pad eyes Welding Areas and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
Name of Inspector:	Name of person authenticating this report:		Client Signature & Stamp:		
ASHRAF ELSAID	MOHAMED ABDALLAH		ALI Talib HB48903 Date: 09/06/2024 Signature Halliburton		
Date of Next Through Examination:	07/12/2024				

REV: 01 Dated: 20 June 2022

THIS IS TO CERTIFY THAT; a competent person duly attended the above-mentioned owner's work location on the date shown above and the equipment described in this report was state 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.

