

CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA01
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
190000230	01	Fall Arrester Manufacture: KARAM Length: 30 M Dia Of Wire: 5 MM Batch No: S30-001 REF.NO: PCGS30 MFR:09/2019 Location: MAST D. S		140 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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
If the answer to the above question is YES has the equipment been installed correctly?		YES	NO	With an interval of 12 months?	
				YES	NO
		N/A		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

Name of Inspector:	Name of person authenticating this report:	Signature & Stamp:	
Mohamed Abdalla	Ashraf Elsaid		
Date of Next Through Examination:	14-01-2025		

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned owner's work location over 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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Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA02
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
0050	01	Fall Arrester Manufacture: KARAM Length: 30 M Dia Of Wire: 5 MM Batch No: 00786406 REF.NO: PCGS30 MFR:09/2019 Location: MAST O. D. S		140 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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"/> N/A		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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Mohamed Abdalla	Ashraf Elsaid		
Date of Next Through Examination:	14-01-2025		

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Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA03
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
202898	01	Fall Arrester Manufacture: SALA Length: 175 FT Dia Of Wire: 5 MM Lot No: 24010179 Model: 3400173 Mfrd:24/JAN Location: CROWN BLOCK D. S		191 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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?	
				Within 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 checked="" type="checkbox"/> NO <input type="checkbox"/> ✓		In accordance with an examination scheme?	
		N/A		After the occurrence of exceptional circumstances?	
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"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/>	

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Date of Next Through Examination:	14-01-2025		

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Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA04
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
169421	01	Fall Arrester Manufacture: SALA Length: 175 FT Dia Of Wire: 5 MM Lot No: 23062479 Model: 3400652 Mfrd:23/JUN Location: CROWN BLOCK O. D. S		191 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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
If the answer to the above question is YES has the equipment been installed correctly?		YES	NO	With an interval of 12 months?	
				YES	NO
		N/A		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

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Mohamed Abdalla	Ashraf Elsaid		
Date of Next Through Examination:	14-01-2025		

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Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA05
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
190000044	01	Fall Arrester Manufacture: KARAM Length: 15 M Dia Of Wire: 5 MM Batch No: 00730428 REF.NO: PCGS15 MFR:07/2019 Location: MONKEY BOARD D. S		140 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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
If the answer to the above question is YES has the equipment been installed correctly?		YES	NO	With an interval of 12 months?	
				YES	NO
		N/A		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					
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Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA06
Client Name:	Hong Hua Oil & Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
0136	01	Fall Arrester Manufacture: KARAM Length: 15 M Dia Of Wire: 5 MM Batch No: 00786402 REF.NO: PCGS15 MFR:11/2019 Location: MONKEY BOARD O. D. S		140 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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"/> N/A			
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					
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Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA07
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
11107	01	Fall Arrester Manufacture: SALA Date of Manufacture: 12.2012 Length: 30 FT Dia Of Wire: 5 MM Model: 3400800 Lot No: 1212379 Location: POOR BOY		141 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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? <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"/> N/A			
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:					
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Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA08
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
190000006	01	Fall Arrester Manufacture: KARAM Length: 15 M Dia Of Wire: 5 MM Batch No: 00728130 REF.NO: PCGS15 MFR:07/2019 Location: SUBSTRUCTURE		140 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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
If the answer to the above question is YES has the equipment been installed correctly?		YES	NO	With an interval of 12 months?	
				YES	NO
		N/A		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:					
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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

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Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA09
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
0126	01	Fall Arrester Manufacture: KARAM Length: 15 M Dia Of Wire: 5 MM Batch No: 00786402 REF.NO: PCGS15 MFR:11/2019 Location: SUBSTRUCTURE		140 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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? <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"/> N/A			
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)					
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Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA10																				
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203																				
Serial Number:	QTY	Description		SWL	Date of last thorough examination																				
0117	01	Fall Arrester Manufacture: KARAM Length: 15 M Dia Of Wire: 5 MM Batch No: 00786402 REF.NO: PCGS15 MFR:11/2019 Location: STORE		140 KG	05-01-2024																				
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC																							
Is this the first examination after Installation or assembly at a new site or location?		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">YES</td> <td style="width: 50%; text-align: center;">NO</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>		YES	NO	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Was the examination carried out:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">YES</td> <td style="width: 33%; text-align: center;">NO</td> <td style="width: 33%;"></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>		YES	NO		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
YES	NO																								
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If the answer to the above question is YES has the equipment been installed correctly?		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">YES</td> <td style="width: 50%; text-align: center;">NO</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="2" style="text-align: center;">N/A</td> </tr> </table>		YES	NO	<input type="checkbox"/>	<input type="checkbox"/>	N/A		Within an interval of 6 months? Within an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">YES</td> <td style="width: 33%; text-align: center;">NO</td> <td style="width: 33%;"></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>		YES	NO		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
YES	NO																								
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N/A																									
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<input type="checkbox"/>	<input type="checkbox"/>	<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?					<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">YES</td> <td style="width: 33%; text-align: center;">NO</td> <td style="width: 33%;"></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	YES	NO		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
YES	NO																								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																							

REV: 01 Dated: 20 June 2022

Name of Inspector:	Name of person authenticating this report:	Signature & Stamp:	
Mohamed Abdalla	Ashraf Elsaid		
Date of Next Through Examination:	14-01-2025		

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned owner's work location & examine & examine the 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 THOROUGH EXAMINATION

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

Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA11
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
195119	01	Fall Arrester Manufacture: SALA Date of Manufacture: 23.MAY Length: 50 FT Dia Of Wire: 5 MM Model: 3400900 Lot No: 23051979 Location: STORE		191 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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"/> Within an interval of 6 months? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	
				<input type="checkbox"/> With an interval of 12 months? <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"/>		In accordance with an examination scheme?	
		N/A		<input type="checkbox"/> YES <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	
				After the occurrence of exceptional circumstances?	
				<input type="checkbox"/> YES <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"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	

REV: 01 Dated: 20 June 2022

Name of Inspector:	Name of person authenticating this report:	Signature & Stamp:	
Mohamed Abdalla	Ashraf Elsaid		
Date of Next Through Examination:	14-01-2025		

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CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA12																				
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203																				
Serial Number:	QTY	Description		SWL	Date of last thorough examination																				
130000540	01	Fall Arrester Manufacture: KARAM Length: 25 M Dia Of Wire: 5 MM Batch No: S25-002 REF.NO: PCGS25 MFR:03/2013 Location: UNDER MONKEY BOARD		140 KG	05-01-2024																				
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC																							
Is this the first examination after Installation or assembly at a new site or location?		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>YES</td> <td>NO</td> <td>✓</td> <td></td> </tr> </table>		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?		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>YES</td> <td>NO</td> <td></td> <td></td> </tr> <tr> <td colspan="4" style="text-align: center;">N/A</td> </tr> </table>		YES	NO			N/A				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>YES</td> <td>✓</td> <td>NO</td> <td></td> </tr> <tr> <td>YES</td> <td>✓</td> <td>NO</td> <td>✓</td> </tr> <tr> <td>YES</td> <td></td> <td>NO</td> <td>✓</td> </tr> </table>		YES	✓	NO		YES	✓	NO	✓	YES		NO	✓
YES	NO																								
N/A																									
YES	✓	NO																							
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

Name of Inspector:	Name of person authenticating this report:	Signature & Stamp:	
Mohamed Abdalla	Ashraf Elsaid		
Date of Next Through Examination:	14-01-2025		

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CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA13
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
245177	01	Fall Arrester Manufacture: SALA Length: 50 FT Dia Of Wire: 5 MM Lot No: 19031172 Model: 3504450 Mfrd: 19/MAR Location: STORE		191 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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? <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"/> N/A			
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"/> <input type="checkbox"/> NO <input type="checkbox"/>	

REV: 01 Dated: 20 June 2022

Name of Inspector:	Name of person authenticating this report:	Signature & Stamp:	
Mohamed Abdalla	Ashraf Elsaid		
Date of Next Through Examination:	14-01-2025		

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CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	15-07-2024	Date of Report:	15-07-2024	Certificate No:	QC-HH-07-24-0203-FA14
Client Name:	Hong Hua Oil& Gas Engineering Services Ltd	Location:	HH Rig 029	Job Number:	QC-HH-07-24-0203
Serial Number:	QTY	Description		SWL	Date of last thorough examination
778257	01	Fall Arrester Manufacture: IKAR Length: 12 M Dia Of Wire: 5 MM Type: HWS12 Mfrd:10/2014 Location: STORE		140 KG	05-01-2024
Reference Standard:		BS EN 360:2002 / BS EN 363:2018 - TC			
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"/> ✓ <input 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"/> N/A	Within an interval of 6 months? Within an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?	
				<input type="checkbox"/> YES <input checked="" type="checkbox"/> ✓ <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)					
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"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/>

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