

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

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**CERTIFICATE OF THOROUGH EXAMINATION**

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

<b>Date of Examination:</b>	30.SEP.2024	<b>Date of Report:</b>	30.SEP.2024	<b>Certificate No:</b>	QC-HALL-0107-15
<b>Client Name:</b>	Halliburton	<b>Location:</b>	TSS Yard	<b>Job Number:</b>	300924

Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
5127 5132 5137 5138 5139 5140 5146	07	<p align="center"><b>ENDLESS ROUND SLING</b></p> <p><b>Manufacture:</b> DELTA PLUS  <b>Type:</b> ENDLESS ROUND  <b>Material:</b> Polyester  <b>Effective Length:</b> 6 M  <b>Straight Pull:</b> 5000 KG  <b>Basket Hitch:</b> 10000 KG  <b>Choker Hitch:</b> 4000 KG  <b>Color:</b> Red  <b>Safety Factor:</b> 7:1</p>	5000 KG	04-2024	MFG 26-04-2024

<b>Reference Standard:</b>	BS EN 1492-2: 2008 / HAL DOC: WM-GL-HAL-HSE-0420F & WM-GL-HAL-HSE-0420C REV 1
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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? With an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?	YES	√	NO	
	YES	NO			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) 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

<b>Name of Inspector:</b>	<b>Name of person authenticating this report:</b>	<b>Signature &amp; Stamp:</b>	
ASHRAF ELSAID	Mohamed Abdullah		
<b>Date of Next Through Examination:</b>	29.MAR.2025		

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.

