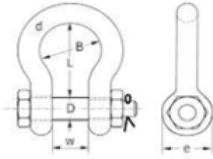




CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	17-09-2024	Date of Report:	17-09-2024	Certificate No:	QC-BGG-09-24-0152 -3
Client Name:	Black Gold Gulf Oil And Gas Services Co.Ltd Basra Iraq	Location:	QC Yard	Job Number:	QC-BGG-09-24-0152
Serial Number:	QTY	Description		SWL	Date of last thorough examination
6120	01	SAFETY PIN BOW SHACKLE Size: 7/8" Grade: 6 Manufacture: DAWSON Location: Store <div style="text-align: center;">  </div>		6.5 TON	N/A
Reference Standard:		BS EN 13889			
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"/>			
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 <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?					YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Name of Inspector:	Name of person authenticating this report:	Signature & Stamp:			
Sajjad Mohammed	Mohamed Abdalla				
Date of Next Thorough Examination:	16-03-2025				

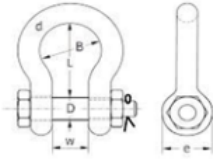


REV: 01 Dated: 20 June 2022

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.



CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	17-09-2024	Date of Report:	17-09-2024	Certificate No:	QC-BGG-09-24-0152 -4
Client Name:	Black Gold Gulf Oil And Gas Services Co.Ltd Basra Iraq	Location:	QC Yard	Job Number:	QC-BGG-09-24-0152
Serial Number:	QTY	Description		SWL	Date of last thorough examination
8125	01	SAFETY PIN BOW SHACKLE Size: 1" Grade: 6 Manufacture: DAWSON Location: Store <div style="text-align: center;">  </div>		8.5 TON	N/A
Reference Standard:		BS EN 13889			
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"/>			
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
Name of Inspector:	Name of person authenticating this report:	Signature & Stamp:			
Sajjad Mohammed	Mohamed Abdalla				
Date of Next Thorough Examination:	16-03-2025				

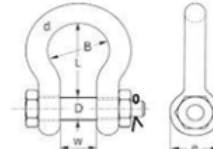


REV: 01 Dated: 20 June 2022

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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:	17-09-2024	Date of Report:	17-09-2024	Certificate No:	QC-BGG-09-24-0152 -5			
Client Name:	Black Gold Gulf Oil And Gas Services Co.Ltd Basra Iraq	Location:	QC Yard	Job Number:	QC-BGG-09-24-0152			
Serial Number:	QTY	Description		SWL	Date of last thorough examination			
4341	01	SAFETY PIN BOW SHACKLE Size: 3/4" Grade: 6 Manufacture: DAWSON Location: Store <div style="text-align: center;">  </div>		4.75 TON	N/A			
Reference Standard:		BS EN 13889						
Is this the first examination after Installation or assembly at a new site or location?		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"/>			
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	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>			
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	<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"/>
Name of Inspector:	Sajjad Mohammed	Name of person authenticating this report:	Mohamed Abdalla	Signature & Stamp:				
Date of Next Thorough Examination:	16-03-2025							

REV: 01 Dated: 20 June 2022

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