



Al Takamul Company for Engineering Services
Quality Control – Iraq



Lifting Accessories of Visual and Thorough Examination

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

Client:	Aberdeen Technical Service Company	Certificate no:	QC-B-03-25-0100/11
Location:	Aberdeen Yard	Job Order No.:	QC-B-03-25-0100
Date of Examination:	14-Mar-2025	Next Inspection Due:	13-Sep-2025
Last Inspection		Last Proof Load Test Date	
28.09.2024		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL
MOD70/DL/F360 MOD70/EU/F327 MOD70/S4/F235 MOD70/S2/F320 MOD70/EU/F324 MOD70/DL/F332	Modular Spreader Beam Modular 70 Spreader Beam with 7m Span consisting of: 4meter Struts - 1 pc (F235) 2meter Strut - 1 pc (F320) End Unit / 0.5 meter - 2 pcs (F327 & F324) Drop Links - 2 pcs (F360 & F332) Manufacturer: Modulift Model: MOD70	01 X 6 pcs	70 ton @ 7 m Span
Reference Standard:	BS EN 13155:2020		

Is this the first examination after Installation or assembly at a new site or location?	YES	NO	✓	Was the examination carried out: Within 6 months? With an interval of 12 months? By an examination scheme? After the occurrence of exceptional circumstances?	YES	✓	NO			
					YES		NO	✓		
If the answer to the above question is YES has the equipment been installed correctly?	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)								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) <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	✓	NO

LEEA & ASNT Level II Inspector Name:	Signature:	Authenticating This Report:	Signature:
Mohamed Abdulla		Ashraf ElSaid	

THIS IS TO CERTIFY THAT: a competent person did attend the owner mentioner'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.

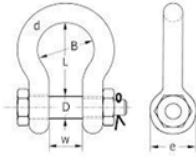




Lifting Accessories of Visual and Thorough Examination

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Client:	Aberdeen Technical Service Company	Certificate no:	QC-B-03-25-0100/12
Location:	Aberdeen Yard	Job Order No.:	QC-B-03-25-0100
Date of Examination:	14-Mar-2025	Next Inspection Due:	13-Sep-2025
Last Inspection		Last Proof Load Test Date	
13.11.2024		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL
EEK51 EEK33	<p>Safety Pin Bow Shackles</p> <p>Size: 2 1/2"</p> <p>Grade: 6</p> <p>Manufacturer: Crosby</p> <p>Safety Factor 6:1</p> <p>Fitted with Modular Spreader Beam</p> 	02	55 Ton
Reference Standard:	BS EN 13889-2003+A1:2008		

Is this the first examination after Installation or assembly at a new site or location?	YES		NO	√	Was the examination carried out: Within 6 months? With an interval of 12 months? By an examination scheme? After the occurrence of exceptional circumstances?	YES	√	NO	
						YES		NO	√
If the answer to the above question is YES has the equipment been installed correctly?	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)						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) <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	√	NO	

LEEA & ASNT Level II Inspector Name:	Signature	Authenticating This Report:	Signature
Mohamed Abdulla		Ashraf ElSaid	

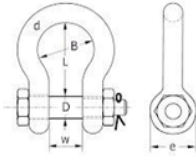
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Lifting Accessories of Visual and Thorough Examination

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

Client:	Aberdeen Technical Service Company	Certificate no:	QC-B-03-25-0100/13
Location:	Aberdeen Yard	Job Order No.:	QC-B-03-25-0100
Date of Examination:	14-Mar-2025	Next Inspection Due:	13-Sep-2025
Last Inspection		Last Proof Load Test Date	
13.11.2024		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL
AT013 AT012	<p>Safety Pin Bow Shackles</p> <p>Size: 2"</p> <p>Grade: 6</p> <p>Manufacturer: MckAT</p> <p>Safety Factor 6:1</p> <p>Fitted with Modular Spreader Beam</p> 	02	35 Ton
Reference Standard:	BS EN 13889-2003+A1:2008		

Is this the first examination after Installation or assembly at a new site or location?	YES		NO	√	Was the examination carried out: Within 6 months? With an interval of 12 months? By an examination scheme? After the occurrence of exceptional circumstances?	YES	√	NO	
						YES		NO	√
If the answer to the above question is YES has the equipment been installed correctly?	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)						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) <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	√	NO	

LEEA & ASNT Level II Inspector Name:	Signature	Authenticating This Report:	Signature
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