





### LIFTING ACCESSORIES OF VISUAL AND THOROUGH EXAMINATION

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

<b>Client:</b>	Nujum Al Ebtikar Co,	<b>Certificate no:</b>	QC-B-05-25-0289-01
<b>Location:</b>	QC Yard	<b>Job Order No:</b>	QC-B-05-25-0289
<b>Date of Examination:</b>	18-May-2025	<b>Next Inspection Due:</b>	17-NOV-2025
<b>Last Inspection</b>		<b>Last Proof Load Test Date</b>	
26- Dec - 2024		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL
24071131	<p><b>Single Leg Wire Rope Sling</b></p> <p><b>DIM : 18.35 m (L) X 16 mm (DIA)</b> 6X36 IWRC, Rope Grade 1960 N/MM2 Galvanized Mechanically Spliced With Aluminium Ferrules. Hard Eye X Hard Eye <b>FOS: 5 : 1</b></p>	01	3 TON
<b>Applicable Reference Standard:</b>	BS EN 13414-1		
* Is this the first examination after installation or assembly at a new site or location?	YES	NO	√
	Was the examination carried out?		
* If the answer to the above question is YES has the equipment been installed correctly?	YES	NO	√
	* Within an interval of 6 months?		YES
* Within an interval of 12 months?		YES	√
* By an examination scheme?		YES	√
* After the occurrence of exceptional circumstances?		YES	√
Identification Of Any Part Found To Have A Defect Which Is Or Could Become A Danger To Persons And A Description Of The Defect: <b>None</b>			
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)		NO	YES
Particulars Of Any Repair, Renewal, Or Alteration Required To Remedy The Defect Identified Above: <b>None</b>			
<b>** Visual And Dimension Check was Carried Out.</b>			
Is This Equipment Safe To Operate?		Yes Accept	NO Reject

<b>LEEAA &amp; ASNT Level II Inspector Name:</b>	<b>SIGNATURE:</b>	<b>Authenticating This Report:</b>	<b>SIGNATURE:</b>
Khaled Mahmoud		Mohammed Abdullah	

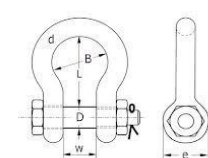
**THIS IS TO CERTIFY THAT:** a competent person did attend the above-mentioned owner’s work location on the date shown above and the equipment described in this report was tested & inspected as per the requirements of Lifting Operations Lifting Equipment Regulation “LOLER”. The result was found Satisfactory at the time of Inspection and considered Safe for Lifting





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<b>Client:</b>	Nujum Al Ebtikar Co,	<b>Certificate no:</b>	QC-B-05-25-0289-02
<b>Location:</b>	QC Yard	<b>Job Order No:</b>	QC-B-05-25-0289
<b>Date of Examination:</b>	18-May-2025	<b>Next Inspection Due:</b>	17-NOV-2025
<b>Last Inspection</b>		<b>Last Proof Load Test Date</b>	
26- Dec - 2025		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL
BT340	<p><b>Safety pin bow Shackles</b></p> <p>Size : 7/8" Grade : 6</p> <p>Manufacture: MCKAT FOS: 5 : 1</p> 	01	6.5 TON
<b>Applicable Reference Standard:</b>	BS EN 13889 / US FED SPEC RR-C-27 1 D		
* Is this the first examination after installation or assembly at a new site or location?	YES	NO	√
	Was the examination carried out?		
* If the answer to the above question is YES has the equipment been installed correctly?	YES	NO	
	* Within an interval of 6 months?		YES
* Within an interval of 12 months?		YES	√
* By an examination scheme?		YES	√
* After the occurrence of exceptional circumstances?		YES	√
Identification Of Any Part Found To Have A Defect Which Is Or Could Become A Danger To Persons And A Description Of The Defect: <b>None</b>			
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)		NO	√
Particulars Of Any Repair, Renewal, Or Alteration Required To Remedy The Defect Identified Above: <b>None</b>		YES	NO
<b>** Visual And Dimension Check was Carried Out.</b>			
Is This Equipment Safe To Operate?		Yes Accept	NO Reject

<b>LEE &amp; ASNT Level II Inspector Name:</b>	<b>SIGNATURE:</b>	<b>Authenticating This Report:</b>	<b>SIGNATURE:</b>
Khaled Mahmoud		Mohammed Abdullah	

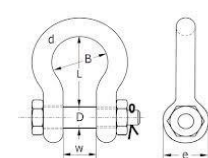
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<b>Location:</b>	QC Yard	<b>Job Order No:</b>	QC-B-05-25-0289
<b>Date of Examination:</b>	18-May-2025	<b>Next Inspection Due:</b>	17-NOV-2025
<b>Last Inspection</b>		<b>Last Proof Load Test Date</b>	
26- Dec - 2025		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL
MF150A	<p><b>Safety pin bow Shackles</b></p> <p>Size : 7/8" Grade : 6</p> <p>Manufacture: GRIPTON FOS: 5 : 1</p> 	01	6.5 TON
<b>Applicable Reference Standard:</b>	BS EN 13889 / US FED SPEC RR-C-27 1 D		
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	Was the examination carried out?		
* If the answer to the above question is YES has the equipment been installed correctly?	YES	NO	
	* Within an interval of 6 months?		YES √ NO
* Within an interval of 12 months?		YES NO √	
* By 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 Become A Danger To Persons And A Description Of The Defect: <b>None</b>			
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)		NO √ YES	By:
Particulars Of Any Repair, Renewal, Or Alteration Required To Remedy The Defect Identified Above: <b>None</b>			
<b>** Visual And Dimension Check was Carried Out.</b>			
Is This Equipment Safe To Operate?		Yes Accept	NO Reject
		√	

<b>LEE &amp; ASNT Level II Inspector Name:</b>	<b>SIGNATURE:</b>	<b>Authenticating This Report:</b>	<b>SIGNATURE:</b>
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