


## CERTIFICATE OF THOROUGH EXAMINATION

This report complies with Provision and use of work equipment regulations

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Date of Through Examination: 10/05/2026	Date of Report: 10/05/2026	Report Number: RAS-U-2605301131
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<u>Description and identification of the equipment:</u> <b>Concrete Pump, Diesel powered, Hydraulic Operated</b>		<b>Manufacturer:</b> MERCEDES ACTROS <b>Year of Manufacture:</b> 2009 <b>Model:</b> 930.14 <b>Serial Number:</b> 406557		
<u>Name and address of employer for whom the thorough examination was made:</u> <b>ABAR AL-WATAN Company</b> <u>Address of premises at which the examination was made:</u> <b>RAS YARD \ AL-BURJESIA</b>		<b>Chassis Number:</b> WDB9301459L406557 <b>Plate Number:</b> 174 ERBIL		
		<b>Manufacturer of concrete Pump:</b> PUTZMEISTER <b>Model of Concrete Pump:</b> M 38-4 <b>Serial Number of concrete Pump:</b> 170209337 <b>Year of Manufacturer of concrete pump:</b> 2009		<b>Max Hydraulic pressure:</b> 350 Bar <b>Max Concrete Pressure:</b> 85 Bar

Is this the first examination after installation or assembly at a new site or location?	<b>Was the examination carried out:</b>								
	YES		NO	✓	Within an interval of 6 months?	YES	✓	NO	
If the answer to the above question is YES, has the equipment been installed correctly?					Within an interval of 12 months?	YES		NO	✓
	YES		NO		In accordance with an examination scheme?	YES		NO	✓
					After the occurrence of exceptional circumstances?	YES		NO	✓

Particulars of any repair, renewal or alteration required to remedy the defect identified above: **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) **NONE** Yes by:

Identification of any part found to have a defect which is or could become a danger to persons and a description of the defect: **NONE**

Particulars of any test carried out as part of examination:  
The Referenced Equipment Has Been Function Tested As per **ISO 21573-2** and Found Satisfactory at the Time of Inspection.

**IS THIS EQUIPMENT SAFE TO OPERATE?** **YES**  **NO**

Name & Qualifications of person making this report: <b>Ahmed Yahya</b> 	Name of person authenticating this report: Signature: <b>Mustafa Salman</b> 	Latest date by which next thorough examination must be carried out: <b>10/05/2027</b>
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Name and address of employer of person making and authenticating this report:  
**Hussein Ali Hussein, Basra, Burjesia**



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GENERAL DESCRIPTION OF THE EQUIPMENT	Status			
	OK	NO	NA	Comments
General	✓			
Axle System	✓			
Tires and Wheels	✓			
Hydraulic System	✓			
Steering System	✓			
Brake System	✓			
Chassis Condition	✓			
Electrical System	✓			
Reverse Alarm	✓			
Signal Light	✓			
Wind Shield	✓			
Glasses & Mirrors	✓			
Engine Oil	✓			
Engine Coolant	✓			
Engine Pre-cleaner	✓			
Air-Filter	✓			
All Hoses	✓			
Radiator	✓			
Seat	✓			
Seat Belt & Mounting	✓			
Horn, Backup Alarm, Lights	✓			
Controls, Gauge, Lenses	✓			
Mechanical connections	✓			
Hydraulic Hoses and Fitting	✓			
First Aid Kit	✓			
Maintenance	✓			
Safety stand	✓			
Lifting arm (Jack)	✓			
Transmission	✓			
Pressure Reading	✓			
Leaks, Cracks	✓			
Controls System	✓			
Exhaust System	✓			



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Putzmeister		Förderleitung	Endschlauch
Putzmeister Concrete Pumping GmbH Max-Eyth-Str. 12 - 72691 Aichtal Germany		MN: <input type="text" value="250372"/>	MN: <input type="text" value="507578"/>
Typ: <input type="text" value="M 38-4"/>		DN: <input type="text" value="120"/>	DN: <input type="text" value="120"/>
Verleimungs-Nr: <input type="text" value="740250337"/>		Typ: <input type="text" value="12000"/>	Förderleitung Pumpe PN: <input type="text" value="223100"/>
Material-Nr. (MNI): <input type="text" value="261909"/>		Kuppelungs-Typ: <input type="text" value="S1"/>	
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		V10: <input type="text" value=""/>	

