


## CERTIFICATE OF THOROUGH EXAMINATION

This report complies with the Lifting Operation and Lifting Equipment Regulations

Certificate Page: 1 Of 4

Date of Through Examination: 25/05/2026	Date of Report: 25/05/2026	Report Number: RAS-U-2605301226
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Description and identification of the equipment: <b>Wheel Forklift Loader, Diesel powered, Hydraulic Operated</b>	<b>Manufacturer:</b> SHANTUI	
	<b>Year of Manufacture:</b> 2025	
<b>Model:</b> L53-G		
<b>Serial Number:</b> B6SLA53ANPG000332		
Name and address of employer for whom the thorough examination was made: <b>Hayakil AL-janub COMPANY</b>	<b>Chassis Number:</b> B6SLA53ANPG000332	<b>Weight:</b> 16400 kg <b>Rated Load:</b> 5.3 Ton
Address of premises at which the examination was made: <b>AL-ZABER</b>	<b>Plate Number:</b> 14 B 68949	
<b>Attachments Details:</b>		
<b>Forks SN:</b> 85C5-1, 85C5-2		
<b>Fork Model:</b> SHANTUI		

Is this the first examination after installation or assembly at a new site or location?	YES	NO	✓	<b>Was the examination carried out:</b>			
				Within an interval of 6 months?	YES	✓	NO
If the answer to the above question is YES, has the equipment been installed correctly?	YES	NO		Within an interval of 12 months?	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	✓
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Is the above a defect which is not yet but could become a danger to persons: (if YES state the date by when) <b>NONE</b>	Yes by:
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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 Visual, Function and Performance Tested As per ISO 3691-1:2015+A1:2020 & ISO 5057 Requirements.  
-MPI Has Been done to the Forks and Clamps According to ASTM E 709.

<b>IS THIS EQUIPMENT SAFE TO OPERATE?</b>	YES	✓	NO
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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>25/05/2027</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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Report Number: **RAS-U-2605301226**

Certificate Page: 2 Of 4

1- FROM GROUND					
	Condition		Corrective Action		Comments
	Pass	Fail	Repair	Replace	
Steps and Handholds	√				
Tires, Lug Nuts, Brakes	√				
Forks, Grapple	√				
Bucket	N/A				
Air reservoir	√				
Transmission	√				
Underneath of Machine	√				
Hydraulic Oil Tank	√				
Batteries & Hold Tank	√				
Fuel Tank	√				
Hydraulic cylinders, tubes, hoses and fittings	√				
Front wheel spindle bearings	√				
All-wheel drive motors	√				
Pliers linkage	√				
Pliers and end bits	√				
2- ENGINE COMPARTMENT					
	Condition		Corrective Action		Comments
	Pass	Fail	Repair	Replace	
Engine Oil	√				
Engine Coolant	√				
Engine Pre-cleaner	√				
Air Filter	√				
All Hoses	√				
Radiator	√				
Engine Oil	√				
3- OPERATOR CAB					
	Condition		Corrective Action		Comments
	Pass	Fail	Repair	Replace	
Seat	√				
Seat Belt & Mounting	√				
Horn, backup alarm, lights	√				
Controls, gauge lenses	√				
Mechanical connections	√				
Hydraulic hoses and fittings	√				
Rams/ seals	√				



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Report Number: RAS-U-2605301226

Certificate Page: 3 Of 4



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Certificate Page: 4 Of 4

LOAD TEST & NDT (MPI) REPORT			
Report No:	260130002	Examination Date:	25/05/2026
LOAD TEST			
Equipment Details			
Load Cell Serial No: 30682 / 25532	Vernier Caliper S/N: ZY 5000\300	Measuring Tape S/N: N/A	

NDT (MPI) FOR CRANE'S HOOK					
NDT Details					
Standard:	ASTME 709	Equipment type:	PERMENANT YOKE	Contrast Media:	WHITE CONTRAST
Viewing Condition	Colored media	Method	WET	Indicator:	BLACK INK
NDT Equipment Details					
YOKE S/N	A12-512	WHITE CONTRAST	MagnavisWCP-2	BLACK INK	Magnavis7HF



Attachments Details	
Attachments Serial Number:	85C5-1, 85C5-2
SWL:	8.5 Ton

NDT Procedure	
Visual & MPI CARRIED OUT FOR THE ABOVE DESCRIPTION AND FOUND FREE OF SURFACE DEFECTS AT THE TIME OF INSPECTION	
Identification of any part found to have a defect and a description of the defect: <b>NONE</b>	
Particulars of any repair, renewal or alteration required to remedy the defect identified above: <b>NONE</b>	
ASNT Level II Inspector Name & Signature: Ahmed Yahya	RESULT: <b>PASS</b>

