

CERTIFICATE OF THOROUGH EXAMINATION

This Report Complies with the Lifting Operation and Lifting Equipment Regulations

Date of Thorough Examination: 16/06/2026		Date of Report: 16/06/2026		Report number: RAS-MU-260650012																									
Name and Address of employer for whom the thorough examination was made: CPECC Company			Address of premises at which the examination was made: NASSRYA Project																										
Description and identification of the equipment: ROUND Webbing Sling	Safety Factor (SF): (7:1)	-Length: 10 m	WLL(s): 10 Ton CHOCKER HITCH: 8Ton BASKET HITCH: 20 Ton	Manufacture: GS Material: Polyester																									
Is this the first examination after installation or assembly at a new site or location?			Was the examination carried out?																										
<table border="1"> <tr> <td>YES</td> <td></td> <td>NO</td> <td>✓</td> </tr> </table>			YES		NO	✓	<table border="1"> <tr> <td>Within an interval of 6 months?</td> <td>YES</td> <td>✓</td> <td>NO</td> <td></td> </tr> <tr> <td>Within an interval of 12 months?</td> <td>YES</td> <td></td> <td>NO</td> <td>✓</td> </tr> <tr> <td>In accordance with an examination scheme?</td> <td>YES</td> <td></td> <td>NO</td> <td>✓</td> </tr> <tr> <td>After the occurrence of exceptional circumstances?</td> <td>YES</td> <td></td> <td>NO</td> <td>✓</td> </tr> </table>			Within an interval of 6 months?	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	✓
YES		NO	✓																										
Within an interval of 6 months?	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	✓																									
If the answer to the above question is YES has the equipment been installed correctly?																													
<table border="1"> <tr> <td>YES</td> <td></td> <td>NO</td> <td></td> </tr> </table>			YES		NO																								
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Serial Number: (00329 - 00316 - 00326 - 00333)			Quantity: 04	Inspection Method: VT & Dimension Check																									
Is the above a defect which is of immediate danger to persons			<table border="1"> <tr> <td>YES</td> <td></td> <td>NO</td> <td>✓</td> </tr> </table>			YES		NO	✓																				
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:																										
Particulars of any repair, renewal or alteration required to remedy the defect identified above: NONE																													
Identification of any part found to have a defect which is or could become a danger to persons and a description of the defect: (If none state NONE) NONE																													
Particulars of any tests carried out as part of the examination: (If none state NONE) The mentioned slings have been visually examined according to BS EN 1492-1:2000+A1:2008																													
IS THIS EQUIPMENT FIT FOR PURPOSE?					<table border="1"> <tr> <td>YES</td> <td>✓</td> <td>NO</td> <td></td> </tr> </table>	YES	✓	NO																					
YES	✓	NO																											
Name & Qualifications of person making this report: YASSER AZIZ		Name of person authenticating this report: Signature: MUSTAFA SALMAN		Latest date by which next thorough examination must be carried out: 15/12/2026																									
Name and address of employer of persons making and authenticating this report: Hussein Ali Hussein, Basra, Burjesia																													

