

CERTIFICATE OF THOROUGH EXAMINATION

This Report Complies with Provision and Use of Work Equipment Regulations

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Date of Through Examination: 05/07/2026	Date of Report: 05/07/2026	Report Number: RAS-AM-260730017
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<u>Description and identification of the equipment:</u> Concrete Mixer Truck, Diesel powered, Hydraulic Operated	<u>Manufacturer:</u> ACTROS <u>Year of Manufacture:</u> 2010 <u>Model:</u> 933.30 <u>Serial Number:</u> WDB9333051L306286 <u>Chassis Number:</u> WDB9333051L306286 <u>Plate Number:</u> 14 B93184		
<u>Name and address of employer for whom the thorough examination was made:</u> Naseem Al-Khasib Engineering Company	<u>Mixer Manufacture:</u> STS Kovo <u>Mixer Serial Number:</u> 815 <u>Mixer Model:</u> 600/5 <u>Mixer Year of Manufacture:</u> 2007		
<u>Address of premises at which the examination was made:</u> UM QASR	<u>Nominal Capacity:</u> 6 m ³ <u>Geometric Volume:</u> 9.5 m ³		

Standard: EN 12609:2021

Reference Equipment Details:

Description	Serial Number	Indicator	Standard	Method
Magnetic Yoke	A12.512	MAG INK	ASTM E709	WET
Is this the first examination after installation or assembly at a new site or location?		YES		NO
		NO		YES
If the answer to the above question is YES, has the equipment been installed correctly?		YES		NO
		NO		YES

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 **EN 12609:2021** and Found Satisfactory at the Time of Inspection.

IS THIS EQUIPMENT SAFE TO OPERATE? YES NO

Name & Qualifications of person making this report:
Ahmed Yahya

Name of person authenticating this report:
Signature: **Mustafa Salman**

Latest date by which next thorough examination must be carried out:
04/07/2027

Name and address of employer of person making and authenticating this report:
Hussein Ali Hussein, Basra, Burjesia



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1- FROM GROUND					
	Condition		Corrective Action		Comments
	Pass	Fail	Repair	Replace	
Axle System	✓				
Tires and Wheels	✓				
Steering System	✓				
Brake System	✓				
Chassis Condition	✓				
Tailgate	✓				
Electrical System	✓				
Lifting Arm Jack	✓				
Reverse Alarm	✓				
Signal Light	✓				
Wind Shield	✓				
Glasses & Mirrors	✓				
Transmission	✓				
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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