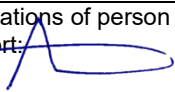
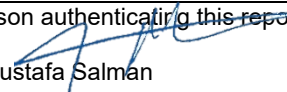


CERTIFICATE OF THOROUGH EXAMINATION

This report complies with the Lifting Operation and Lifting Equipment Regulations

Date of Thorough Examination: 09/07/2026		Date of Report: 09/07/2026		Report number: RAS-AM-260750010																									
Name and Address of employer for whom the thorough examination was made: IGCC			Address of premises at which the examination was made: RTAWI FEILD																										
Description and identification of the equipment: 4 EA LIFTING PADEYE FOR CARAVAN (TOILET)	Safety Factor (SF): (2:1)	Dimensions (LxWxH): (2.25 x 2.25 x 2.80) m	SWL: 3 Ton	Manufacture: LOCAL																									
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?																													
Unit Serial Number: #4220			 		Inspection Method: • VT • MPI • Dimension Check • Load Test Quantity: 04																								
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:																										
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 Pad Eyes Has Been Visual, MPI & Load Tested According to LOLER 98																													
IS THIS EQUIPMENT FIT FOR PURPOSE?			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: 08/01/2027																									
Name and address of employer of persons making and authenticating this report: Hussein Ali Hussein, Basra, Burjesia																													

