

CERTIFICATE OF THOROUGH EXAMINATION

This Report Complies with the Lifting Operation and Lifting Equipment Regulations

Date of Through Examination: 27/08/2026	Report Date: 27/08/2026	Report number: RAS-U-260850140
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Name and Address of employer for whom the thorough examination was made: IGCC Company		Address of premises at which the examination was made: RAS\YARD	
Description and identification of the equipment: Safety Pin Bow Shackles	<u>Safety Factor (SF):</u> (5:1)	<u>Size:</u> 1-1¼ Inch	<u>Safe Working Load(s):</u> 12 (Tonne) <u>Manufacture:</u> CROSLY 
Is this the first examination after installation or assembly at a new site or location? YES ☐ NO ☒		Was the examination carried out: 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? YES ☐ NO ☐			
Serial Number: (S.N-ND15), (S.N-B42) (S.N-ND16), (S.N-ND10), (S.N-LA-27)		Quantity: 05	Inspection Method: VT& Dimension Check
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 items have been thoroughly examined according to EN 13157, and found satisfactory at the time of inspection.			
IS THIS EQUIPMENT FIT FOR PURPOSE? YES ☒ NO ☐			
Name & Qualifications of person making this report: Mustafa Salman	Name of person authenticating this report: Signature: Ahmed Yahya	Latest date by which next thorough examination must be carried out: 26/02/2027	
Name and address of employer of persons making and authenticating this report: Hussein Ali Hussein, Basra, Burjesia			

