

CERTIFICATE OF THOROUGH EXAMINATION

This Report Complies with the Lifting Operation and Lifting Equipment Regulations

Date of Thorough Examination: 30/08/2026		Date of Report: 30/08/2026		Report number: RAS-AM-260850151	
Name and Address of employer for whom the thorough examination was made: IGCC COMPANY			Address of premises at which the examination was made: IGCC COMPANY YARD		
Description and identification of the equipment: DOUBLE (2) LEG WIRE ROPE SLINGS - IDEAL FOR YOUR LIFTING & RIGGING NEEDS		Safety Factor (SF): 5:1 Effective Working Length: 6.09M (12378), 6.295M (12379)		SWL: 18.3 Ton Diameter: 40 mm Manufacture: LNS	
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: 6.09M (12378), 6.295M (12379)		Quantity: 02 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 equipment has been visually Examined in accordance with EN 13414-1					
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: 29/02/2027	
Name and address of employer of persons making and authenticating this report: Hussein Ali Hussein, Basra, Burjesia					

