RAYAT AL-SHARQ راية الشرق
For Trading, General Contracting, General Transportation & Inspection Services LTD Company

Al-Burjesia, Basra-Iraq
+9647703178132
+9647823386633
http://www.ras-iq.com
info@ras-iq.com

# CERTIFICATE OF THOROUGH EXAMINATION

This Report Complies with the Lifting Operation and Lifting Equipment Regulations

| Date of Through Examination: 22/10/2026 | Report Date: 22/10/2026 | Report number: RAS-AM-260105015 |
|---|---|---|

| Name and Address of employer for whom the thorough examination was made: CPP COMPANY | | | Address of premises at which the examination was made: CPP COMPANY-CAMP | | |
|---|---|---|---|---|---|
| Description and identification of the equipment: Safety Pin Bow Shackles | **Safety Factor (SF):** (6:1) | **Size:** 2-1/2 Inch | **Safe Working Load(s):** 55 Tonne | **Manufacture:** Crosby | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 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 | |
| If the answer to the above question is YES has the equipment been installed correctly? | 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 | ✓ |

| Serial Number: | Quantity: | Inspection Method: |
|---|---|---|
| **GPS291, T15, GPS288, GPS292, GPS289, T16, GPS283, GPS284, GPS284, GPS285** | **10** | **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: Ahmed Yahya | Name of person authenticating this report: Signature: Mustafa Salman | Latest date by which next thorough examination must be carried out: 21/04/2027 |
|---|---|---|

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

شركة راية الشرق RAYAT AL-SHARQ Co.