



**Certificate of Thorough Examination & NDT of Lifting Equipment**

This Certificate complies with the requirements of the Lifting Equipment Operations and Lifting Equipment Regulations

<b>Client Name:</b>	<b>Hilong Oil Services &amp; Engineering</b>	<b>Rig Number:</b>	<b>HL-99</b>	<b>Job Number:</b>	<b>ATS-05-24-3200</b>
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<b>Date of Examination:</b>	<b>21/05/2024</b>	<b>Date of Report:</b>	<b>21/05/2024</b>	<b>Certificate No:</b>	<b>ATS-05-24-3200-128</b>
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Serial Number:	QTY	Description	SWL	Date of last Thorough examination
L7 L8	02	<b>Fabricated Pad Eyes</b>  Pad Eye Dimension Thickness: 21 MM Pin Hole : 60 MM Length : 147 MM Height : 161 MM Location: LOWER MAST SN: 10180701	10 TONS	N/A
		 		

<b>Reference Standard:</b>	LEEA DOC 048:2015		
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? With an interval of 12 months?	YES	✓	NO
If the answer to the above question is YES has the equipment been installed correctly?	YES	NO	✓
In accordance with an examination scheme? After the occurrence of exceptional circumstances?	YES	✓	NO

Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) **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) N/A

Particulars of any repair, renewal or alteration required to remedy the defect identified above: **NONE**

**IS THIS EQUIPMENT SAFE TO OPERATE?** YES  NO

NDT Equipment Details					
Standard	ASTM E709	Viewing Condition:	Colored Media	Method	WET
Yoke	AC	Serial No:	201504044	Due Date	04-07-2024
Vernier Caliper	Digital	Serial No:	8914	Due Date	04-07-2024
White Contrast	FLUXO: WCP-4	Batch No:	L230523/1	Due Date	23-05-2028
Black Ink	FLUXO: Black magnetic ink-3	Batch No:	L230125/3	Due Date	25-1-2025

**NDT Results**  
Visual and MPI carried out for the above description and found free of surface defects at the time of inspection  
Identification of any part found to have a defect and a description of the defect: **NONE**  
Particulars of any repair, renewal or alteration required to remedy the defect identified above: **NONE**

<b>Name of Inspector:</b>	<b>Name of person authenticating this report:</b>
Aram Dlawar 	Hasan Omran
	<b>Signature &amp; Stamp:</b>
<b>Latest date by which next thorough examination must be carried out: 20-11-2024</b>	

