



## Certificate of Test and Thorough Examination of Lifting Equipment – Wheeled Loader Forklift

*This Report Complies with The Requirements of The Lifting Operations and Lifting Equipment Regulations 1998 S.I. No. 2307*

<b>Owner name and address:</b>	HILONG OIL SERVICE AND ENG CO, Iraq	<b>Date of Examination:</b>	12-November-2024
<b>Location of Examination:</b>	HILONG RIG 99 – Southern Rumila: RU264	<b>Date of Certificate:</b>	12-November-2024
<b>Certificate Number:</b>	ATS-11-24-4375-FL-01	<b>Job Number:</b>	ATS-11-24-4375
<b>Maker of Forklift / Mfg.:</b>	XCMG	<b>Type / Model:</b>	LW500KV
<b>SWL:</b>	5 tonnes	<b>Serial No.:</b>	XUG0500KCJCB11866
<b>Plate registration number:</b>	2672 - Basra	<b>Chassis No:</b>	XUG0500KCJCB11866
<b>Description of equipment</b>	<b>XCMG Wheeled Loader Forklift</b> Motive power: Diesel Engine (Model: WP10G220E341) Date of Manufacture: 2018 Operating mass: 17330 Kg Dimensions: 8575*2850*3515 mm Max. Speed: 41 Km/h Engine Power: 162 KW		
<b>(Checklist) Report No:</b>	ATS-11-24-4375-FL-02		
<b>Reference Standards:</b>	BS EN ISO 3691-1:2015+A1:2020, BS ISO 5057:1993		
<b>Operational Load Test</b>	<b>SWL (Ton)</b>	<b>Operational Test Load Applied (Ton)</b>	
	<b>5.0</b>	<b>5.0</b>	

\*Wheeled loader Forklift: Visual, functional, and operational tests were carried out.

\* Wheeled loader Forklift: found Safe to continue in service.

<b>Last Inspection Date</b>	<b>Next Inspection Due Date</b>	<b>Last Proof Load Test Date</b>	<b>Next Proof Load Test Due</b>
13-November-2023	11-November-2025	13-November-2023 Done by GES company (Cert. #: HIL-VT-23-032)	After Modification or Major Repair

Is this the first examination after installation or assembly at a new site or location?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Was the examination carried out:	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
					Within an interval of 6 months?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Within an interval of 12 months?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
					In accordance with an examination scheme?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
					After the occurrence of exceptional circumstances?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>

**Identification of any part found to have a defect which is or could become a danger to persons and a description of the defect:**

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) NO  YES  By: \_\_\_\_\_

**Particulars of Any Repair, Renewal or Alteration Required to Remedy the Defect Identified Above:**

None

**Particulars of Any Tests Carried Out as Part of The Examination:**

Visual, functional, and operational load test up to the full SWL to check hydraulic cylinder creeping (Load descend), and MPI by using wet particles for the critical areas of forks and carrier welding joints.

Is This Equipment Safe to Operate? Yes Accept  No Reject

<b>Inspector Name, Qualifications &amp; signature:</b>  Hasan Omran NDT Level II (VT, MT, PT, UT) LEEA Registered Technician	<b>Authenticated By:</b>  Majd Dayoub	<b>Stamp and Date:</b>  12-Nov-2024
--	---	---

**THIS IS TO CERTIFY THAT:** a competent person did attend the above-mentioned owner's work location on the date shown above and the equipment described in this report has been Thoroughly Examined as per the requirements of Lifting Operations Lifting Equipment Regulation "LOLER". The result was found Satisfactory at the time of Inspection and considered Safe for Lifting.

ATS-LIF-F-001-F ISSUE 3 - MAR 2021