Certificate of Test and/or Report of Thorough Examination

SI 1998 No 2307 Lifting Operations and Lifting Equipment Regulations

SI 2006 No 2184 The Merchant Shipping Vessels (Lifting Operations and Lifting Equipment) Regulations [as amended by The Merchant Shipping and Fishing Vessels (Lifting Operations and Lifting Equipment) (Amendment) Regulations SI 2008 No 2166]

EnerMech Howes Road Bucksburn Aberdeen, AB16 7AG



	•	oloyer for whom the on is made (Client)	Location of Equipment Tested/Examined	Job No	Job No RGL55008				Date of Test/ Examination		8 th May 2024				
CNOOC Petroleum Europe Ltd Prospect House, 97 Oxford Road			EnerMech Howes Road	PO No	PO No 4400130778 - LINE 1			Date of	f Report 8 th		8 th May 2024				
Uxbridge, UB8 1LU			Bucksburn Aberdeen, AB16 7AG		ı	Report Number		R:	RS-N238396-36						
Unique ID No	Proof Load Test Cert/ EC Dec/ equivalent Number	Equipment Description			Proof Load Applied (tonnes)	SWL (WLL) (tonnes) Inc angle/ radius if appropriate	last	Date of last TE Manufacturer and date of manufacture (if known)		Safe For Use and/or Comment/ Limitations	Date N TE Due				
EM94387	RS-N237100	Universal Beam Clam Suitable for Side Load Model: BCU-0300 Suitable for Flange Ra Serial Number: 20042	d Applications ange 125mm – 204mm		N/A	3t	02	2/24	Tig	ger	Safe for Use	07/12/	⁷ 24		
NDE Report	No	N/A			New Inst	allation or A	ssem	bly	No						
Basis of Examination 6 monthly under SI 1998 (tick one) No 2307 Reg 9(3)(a)(i)*			12 monthly under SI 199 No 2307 Reg 9(3)(a)(ii) ³	* 🗕	Examination Scheme under SI 1998 No 2307Reg 9(3)(a)(iii)*					998 No :	nal Circumstance ur 2307 Reg 9(3)(a) (iv)*			
Or equivaler	nt part of Regulat	tion 12 of the Merchant:	Shipping Vessels (Lifting Opera	ations and	Or equivalent part of Regulation 12 of the Merchant Shipping Vessels (Lifting Operations and Lifting Equipment) Regulations TE = Thorough Examination										

I hereby declare that, on the date above, the item(s) of equipment listed above was/were tested and/or thoroughly examined and that the particulars stated above are correct. Any

Thereby declare that, on the date above, the item(s) of equipment listed above was/were tested and/or thoroughly examined and that the particulars stated above are correct. Any qualification due to access limitation is described in Comments column above. If appropriate an NDE Report will be issued simultaneously.

Signature NAME and qualifications D LAMB; LEEA-LEG (in capitals)	OR	Signature NAME L. MORGAN; LEEA – LEG (in capitals, of person signing on behalf of or authenticating the Report)
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