



WILLIE TINGAI

Position: Material Coordinator, Barge Administration, Marine Coordinator,
Logistics, Crewing, Human Resource and Business Development

PERSONAL DETAILS

| | | | |
|-------------------------|--|---------------------------------------|---------------------|
| IC No: | 880327-52-6353 | Race: | Saban |
| Address: | Lot 11869 Lorong Budaya 2D, Taman Jelita Taman Tunku, 98000 Miri, Sarawak | Total Experience: | 12 years |
| Contact No: | 016-8622101 | Availability: | 1 Week notice |
| Email: | chergreaveswillie@gmail.com | Next of Kin/ Relationship: | Son Tingai/ Sibling |
| Coverall/ Shoes: | L/41 | Contact No: | 012-895 7858 |

EDUCATION BACKGROUND

| Institutions | Duration | Qualification |
|--|-----------|--|
| University Malaysia Sabah (UMS- Kota Kinabalu, Sabah) | 2008-2011 | Bachelor of Social Science with Honours Industrial Relations |
| SMK Marudi, Baram, Sarawak | 2006-2007 | STPM- Geography |
| SMK Temenggong Datuk Lawai Jau, Ulu Baram | 2001-2005 | SPM- Sastera |
| SK Long Banga/ SK Bario | 1995-2000 | UPSR |

MEDICAL, COURSE AND TRAINING

| Descriptions | Date Attended | Expiry Date |
|---|---------------|-------------|
| Offshore Medical | 27/02/2024 | 27/02/2025 |
| Marine Medical | 02/12/2024 | 01/12/2026 |
| Seaman Book | 03/12/2024 | N/A |
| Seaman Card | 03/12/2024 | 02/12/2029 |
| TBOSIET-CAEBS | 06/03/2024 | 07/03/2028 |
| H2S | 09/03/2024 | 08/03/2026 |
| PCSB PTW Level 1 Awareness (Contractors) | 19/03/2024 | 19/03/2027 |
| CCC Card (PETRONAS) | N/A | 21/03/2026 |
| OSP Card (PETRONAS) | N/A | 27/02/2025 |

EMPLOYMENT BACKGROUND

| Company | Position | Duration/ Project Location | Onshore/Offshore |
|--|----------------------------------|---|------------------|
| MMHE (Rollover Crew- Sealane Shipping Sdn Bhd) | Barge Admin, MATCO and logistics | 2023- November 2024/ Bokor CPP/Kasawari CPP | Offshore |
| Press Metal Bintulu Sdn hd | HR, Senior Executive | 2022-April 2023 | Onshore |
| Freelander Tech international Sdn Bhs | HR/ Crewing Manager | May 2019- 2021 | Onshore |
| Petra Marine | Senior Crewing Executive | 2019- May 2019 | Onshore |
| Neopetro Sdn Bhd | Crewing Executive | 2014-2018 | Onshore |
| Sribima Shipping Sdn Bhd | Crewing Executive | 2011-2014 | Onshore |
| SK Long Banga | Temporary Teacher | Jan 2008-March 2008 | N/A |

REFERENCE

| Name | Company | Position | Contact No. |
|-----------------------------|---------------------------------------|--------------------------|-----------------|
| Khairul Asnoor bin Abdullah | MMHE | OTL | +60 12-709 4343 |
| Hj Saifullah Bin Hamzah | MMHE | Logistics Coordinator | +60 13-720 2617 |
| Jolly Tagong | Neopetro Sdn Bhd | Operations Director | +60 13-839 2877 |
| Agan Maran | Freelander Tech international Sdn Bhd | Director | +60 12-315 8535 |
| Nina Anak Meling | Press Metal Bintulu | Public Relations Manager | +60 19-877 2266 |
| Stephen Morgan | Petra Marine | Technical Lead | +60 19-887 4688 |

KAD PENGENALAN
MALAYSIA
IDENTITY CARD

880327-52-6353

MyKad

WILLIE TINGAI

LONG BANGA
98050 BARAM
SARAWAK

FOR EMPLOYMENT PURPOSE

WARGANEGARA
LELAKI

K

KETUA PENGARAH
PENDAFTARAN NEGARA

880327-52-6353-05-01

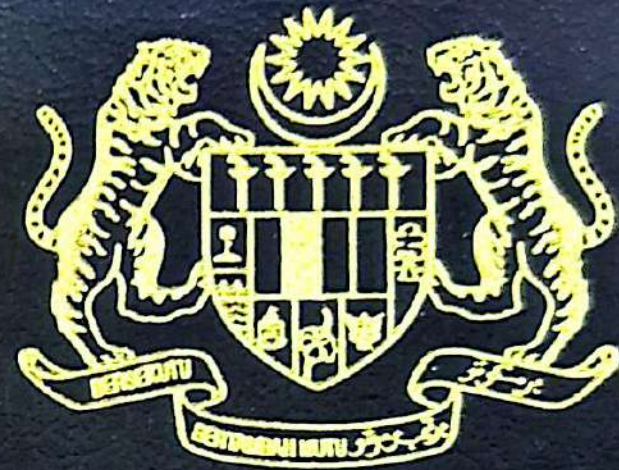
Touch
ngo

80K
chip

SN: D200D0330C

FOR EMPLOYMENT PURPOSE

MALAYSIA



**PASPORT TERHAD KE
*RESTRICTED PASSPORT TO***

**NEGARA BRUNEI
DARUSSALAM**

Pembelajaran Matematika Realistik

N. D. Djatmika

Tandatangan

an Pembawa/Sign



00499375



K004993751MYS8803274M2812265880327526353<<02

UNIVERSITI MALAYSIA SABAH



hereby confers upon

WILLIE TINGAI

having fulfilled all the requirements as prescribed
in the Statutes of the University

**BACHELOR OF SOCIAL SCIENCE WITH HONOURS
(INDUSTRIAL RELATIONS)**

Class Two : II

on the 26th of November 2011
being the 30th of Zulhijjah 1432AH


Vice Chancellor





Dean


Registrar



UMS: 130998



UNIVERSITI MALAYSIA SABAH

Beg Berkunci 2073, 88999 Kota Kinabalu, Sabah, Malaysia
 Locked Bag 2073, 88999 Kota Kinabalu, Sabah, Malaysia

NAME : WILLIE TINGAI IC/PASSPORT NO : 880327526353
 SCHOOL : SCHOOL OF SOCIAL SCIENCE STUDENT NO : BA08110188
 PROGRAMME CODE : HA12
 PROGRAMME : INDUSTRIAL RELATIONS

SEMESTER 1 SESSION 2010/2011

GPA : 2.81 CGPA : 2.74

| CODE | COURSE | GRADE | REPEAT |
|---------|---|-------|--------|
| AH30103 | CONSULTATION STRATEGY AND ARBITRATION | C+ | |
| AH30303 | COMPARATIVE STUDIES IN INDUSTRIAL RELATIONS | B | |
| AH30903 | INDUSTRIAL INFORMATION MANAGEMENT SYSTEM | B | |
| AH30703 | LABOUR ORGANIZATION TRANSITION | B | |
| AH30503 | TRAINING AND DEVELOPMENT | B+ | |
| FZ20303 | FORESTRY AND COMMUNITY | C | |
| FZ20503 | FORESTRY POLICIES AND MANAGEMENT | B | |

SEMESTER 2 SESSION 2010/2011

GPA : 3.19 CGPA : 2.82

| CODE | COURSE | GRADE | REPEAT |
|---------|--|-------|--------|
| AH31106 | PRACTICAL TRAINING/THESIS | A- | |
| AH30803 | WAGES MANAGEMENT AND COMPENSATION | B | |
| AH31003 | THE DYNAMICS OF LABOUR RELATIONS AND CONTEMPORARY ISSUES | B- | |
| AH30403 | INTERNATIONAL HUMAN RESOURCES MANAGEMENT | B | |
| AH30203 | LABOUR ISSUES | B+ | |
| FZ20603 | ENVIRONMENT ISSUES IN FOREST INDUSTRY | B | |

END OF TRANSCRIPT

CUMULATIVE GRADE POINT AVERAGE : 2.82
 DEGREE AWARDED : BACHELOR OF SOCIAL SCIENCE WITH HONOURS (INDUSTRIAL RELATIONS)
 CLASS : TWO : II

MEJ. (K) DATUK ABDULLAH HJ. MOHD. SAID
 REGISTRAR
 UNIVERSITI MALAYSIA SABAH
 Print Date: 25/11/2011



UNIVERSITI MALAYSIA SABAH

Beg Berkunci 2073, 88999 Kota Kinabalu, Sabah, Malaysia
 Locked Bag 2073, 88999 Kota Kinabalu, Sabah, Malaysia

NAME : WILLIE TINGAI IC/PASSPORT NO : 880327526353
 SCHOOL : SCHOOL OF SOCIAL SCIENCE STUDENT NO : BA08110188
 PROGRAMME CODE : HA12
 PROGRAMME : INDUSTRIAL RELATIONS

SEMESTER 1 SESSION 2008/2009

GPA : 2.81 CGPA : 2.81

| CODE | COURSE | GRADE | REPEAT |
|---------|--|-------|--------|
| UW00102 | ETHNIC RELATIONS | B | |
| AH10103 | INTRODUCTION TO INDUSTRIAL RELATIONS | C | |
| AT10103 | INTRODUCTION TO SOCIAL SCIENCE | C+ | |
| AT10303 | CONTEMPORARY ISSUES IN SOCIAL SCIENCES | B+ | |
| ES00403 | SOCCER | A- | |
| UB00102 | COMMUNICATIVE ENGLISH GRAMMAR | C+ | |
| UC00302 | NEGOTIATION SKILLS | B | |

SEMESTER 2 SESSION 2008/2009

GPA : 2.61 CGPA : 2.71

| CODE | COURSE | GRADE | REPEAT |
|---------|---|-------|--------|
| UE00402 | INTRODUCTION TO ETHICS | D | |
| UW00202 | ISLAMIC AND ASIA CIVILIZATION | B+ | |
| UK00602 | ARTS APPRECIATION | A- | |
| UB00202 | ORAL COMMUNICATION IN ENGLISH | B- | |
| AT10203 | INTRODUCTION TO SOCIAL RESEARCH METHODS | C- | |
| AT10403 | METHODOLOGI OF ACADEMIC WRITINGS | B+ | |
| AH10203 | HISTORY OF LABOUR IN MALAYSIA | B- | |

SEMESTER 1 SESSION 2009/2010

GPA : 2.58 CGPA : 2.67

| CODE | COURSE | GRADE | REPEAT |
|---------|--|-------|--------|
| UB00302 | READING AND WRITING IN ENGLISH | D+ | |
| AT20103 | ICT FOR SOCIAL SCIENCES | C+ | |
| AH20703 | HUMAN RESOURCES MANAGEMENT | B- | |
| AH20503 | INDUSTRIAL SAFETY AND HEALTH | B- | |
| AH20303 | DATA ANALYSIS AND ORGANIZATION BEHAVIOUR | B | |
| AA20503 | SOCIOLOGY OF INDUSTRY | B- | |
| AH20103 | ORGANIZATION COMMUNICATION | B | |

SEMESTER 2 SESSION 2009/2010

GPA : 2.85 CGPA : 2.73

| CODE | COURSE | GRADE | REPEAT |
|---------|--|-------|--------|
| FZ20403 | PARK MANAGEMENT AND OUTDOOR RECREATION | B+ | |
| FZ20103 | INTRODUCTION TO FOREST RESOURCES | A- | |
| AH21003 | INDUSTRIAL RELATION RESEARCH METHOD | C+ | |
| AH20403 | PRODUCTION MANAGEMENT AND INDUSTRIAL RELATIONS | B | |
| AH20603 | POLITICAL ECONOMY OF INDUSTRIAL RELATIONS | B | |
| AH20203 | LABOUR LAW | B- | |
| AH20803 | INDUSTRIAL RELATIONS IN MALAYSIA | B- | |
| UB00402 | ACADEMIC READING AND WRITING | C- | |
| UW00302 | FUNDAMENTALS OF ENTREPRENEURIAL ACCULTURATION | B | |



Certificate

of Achievement

This is to certify that

WILLIE TINGAI
IC/Passport : 880327-52-6353

*Has been successfully assessed against and met the
learning outcomes of*

**TROPICAL BASIC OFFSHORE SAFETY INDUCTION & EMERGENCY TRAINING WITH CA-EBS
AND TRAVEL SAFELY BY BOAT
(OPITO APPROVED COURSE, CODE 5509)**

The course covers modules on Safety Induction, Helicopter Underwater
Escape Training (HUET) with CA-EBS, Sea Survival & First Aid, Fire Fighting & Self Rescue and
Boat Transfer

Held On

06/03/2024 - 08/03/2024



Instructor



Director

Certificate number:
45295509080324017

Valid Until:
07/03/2028

IGTC Sdn. Bhd. In Partnership with IG Training Centre Sdn. Bhd.

Add: Lot 11619, Block 5, Jalan Jati 2C, Desa Senadin, Phase 4, 98000 Miri, Sarawak, Malaysia.

Tel: +6 085 646 179 / +6 085 646 197 Fax: +6 085 645 197

Website : www.igtrainingcentre.com

Email : booking@igtrainingcentre.com

IGTC



IGTC

This is to certify that

Willie Tingai

attended a course at IGTC Sdn Bhd In Partnership with IG Training Centre
Sdn Bhd

**and has been assessed against, and met the outcomes of, the following
OPITO-approved standard:**

Basic H2S Training

9014

Awarded on 9th March 2024

Expiry Date 8th March 2026
Unique Certificate No OPITOmPVjqqqC6
OPITO Learner No L02030100

A handwritten signature in black ink, appearing to read "John McDonald".


John McDonald
Chief Executive Officer



OFFSHORE AND REMOTE ONSHORE MEDICAL FITNESS CERTIFICATE

| A: Personnel Data | | | | |
|--|---------------|----------|---------------------------------|-------------|
| Full Name: | WILLIE TINGAI | | DOB: | 27 Mar 1988 |
| ID No: | 880327526353 | Tel No: | Occupation: Crewing Coordinator | |
| Date: | 27 Feb 2024 | Company: | Sea Lane Shipping S/B | |
| B: Type of Examination | | | | |
| Initial/ Renewal | | | | |
| C: Type of Evaluation | | | | |
| <input checked="" type="checkbox"/> G General Work (Other than specific job) | | | | |
| <input type="checkbox"/> S1 Catering Crew | | | | |
| <input type="checkbox"/> S2 Confined Space Worker | | | | |
| <input type="checkbox"/> S3 Crane Operators | | | | |
| <input type="checkbox"/> S4 Electrical Worker | | | | |
| <input type="checkbox"/> S5 Emergency Response Team (ERT) | | | | |
| <input type="checkbox"/> S6 Respirator Protective Equipment User | | | | |
| <input type="checkbox"/> S7 Working at Height | | | | |
| <input type="checkbox"/> V1 Visitor | | | | |

| D: Fitness to Work Status |
|---|
| The above personnel has been assessed in accordance to the "Guidelines on Medical Assessment of Fitness to work for Offshore & Remote Onshore Workers" issued by Malaysia Petroleum Management and the fitness to work status for evaluation listed in Section C is/are as follows. |
| <input type="checkbox"/> 1. Fit with no restrictions. Valid until (dd/mm/yy) |
| <input checked="" type="checkbox"/> 2(a). Fit with Validity Restriction Only (dd/mm/yy) 27 Feb 2025 |
| <input type="checkbox"/> 2(b). Fit with Task Restriction. Valid until (dd/mm/yy) |
| The employee is fit for above work but should avoid the following tasks: |
| <input type="checkbox"/> Work near moving machinery or sharp edges |
| <input type="checkbox"/> Operate motor vehicles or heavy machinery |
| <input type="checkbox"/> Use a respirator |
| <input type="checkbox"/> Repetitive twisting of valves or wrenches |
| <input type="checkbox"/> These task restrictions are Permanent |
| <input type="checkbox"/> Working at height |
| <input type="checkbox"/> Pull push carry weight over KG |
| <input type="checkbox"/> Others (Specify): |
| <input type="checkbox"/> These task restrictions are Temporary |
| <input type="checkbox"/> 3. Not Fit To Work |

| E: Approved Medical Examiner's Details |
|---|
| MPM AME Name: SUBRAMANIAN A/L RM PALANIAPPAN |
| MPM AME No: MPM AME038 |
| Address: Lot 1035-1039, Jalan Bulan Sabit, Miri, Sarawak Sarawak |
| Tel: 085437755 |
| Date: 27 Feb 2024 |
|  |
| Cert. No: 03800380195 |

NOTE: MPM does not recognize this physical form as reference of medical fitness status for OSP card issuance.

FORM C - OFFSHORE AND REMOTE ONSHORE MEDICAL ASSESSMENT FORM

SECTION 1 - TO BE COMPLETED BY EMPLOYEE (PERSONAL INFORMATION, HEALTH DECLARATION AND CONSENT)

A. Worker Details

| | | | |
|--------------------------------------|------------------------------|-----------------|----------------------------|
| Name | <u>WILLIE TINGAI</u> | NRIC / Passport | <u>88027-52-6353</u> |
| Company & Address | <u>SEA LANE SHIPPING S/P</u> | Age | <u>36</u> |
| Date of examination | <u>27-2-2024</u> | Occupation | <u>CREWING COORDINATOR</u> |
| Place of examination | <u>PAH</u> | Race | <u>SABAN</u> |
| Name & Address of personal physician | | | |
| | | | |

List your last 3 jobs 1. _____ 2. _____ 3. _____

B. Type of examination

☐

Initial/Renewal

☐

Return to work

C. Type of Evaluation for Offshore & Remote Onshore (As per Employer Letter/Instruction)

| | |
|--|--|
| <input checked="" type="checkbox"/> G General work (Other than Job Specific) | <input type="checkbox"/> S5 Emergency Response Team (ERT) |
| <input type="checkbox"/> S1 Catering Crew | <input type="checkbox"/> S6 Respirator Protective Equipment User |
| <input type="checkbox"/> S2 Confined Space Worker | <input type="checkbox"/> S7 Working at Height |
| <input type="checkbox"/> S3 Crane Operators | <input type="checkbox"/> V1 Visitor |
| <input type="checkbox"/> S4 Electrical Worker | |

DO YOU HAVE OR HAVE YOU HAD : (Tick 'Yes' or 'No')

| Description | Y | N | Description | Y | N | Description | Y | N |
|--|---|---|--|---|---|--|---|---|
| 1.Sinus trouble | | / | 22.Cancer | | / | Have you ever been:- | | |
| 2.Neck swelling / gland | | / | 23.Heart disease | | / | 43.Rejected for employment or insurance | | / |
| 3.Difficulty in vision | | / | 24.Rheumatic fever | | / | 44.Awarded benefits for Industrial injury/ illness | | / |
| 4.Any ear discharge | | / | 25.Abnormal heartbeat | | / | 45.Treated for problem of mental condition | | / |
| 5.Bronchial Asthma / Bronchitis | | / | 26.High blood pressure | | / | 46.Treated for problem of alcohol or drug | | / |
| 6.Hay fever / Other allergy | | / | 27.Stroke | | / | 47.Exposed to toxic substances or noise | | / |
| 7.Any skin trouble | | / | 28.Serious chest pain | | / | WOMAN ONLY, Have you ever had:- | | |
| 8.Tuberculosis | | / | 29.Any blood disease | | / | 48.Abnormal Pap smear | | / |
| 9.Coughed / Vomited blood | | / | 30.Painful passage of urine | | / | 49.Any gynecological condition / treatment | | / |
| 10.Severe abdominal pain | | / | 31.Blood in urine | | / | 50.Are you pregnant | | / |
| 11.Stomach Ulcer | | / | 32.Diabetes | | / | Will you be doing any of these specific activities; | | |
| 12.Recurrent indigestion | | / | 33.Headache / Migraine | | / | 51.Crane Operators | | / |
| 13.Jaundice or hepatitis | | / | 34.Dizziness / fainting | | / | 52.Users of Breathing Apparatus | | / |
| 14.Gall Bladder disease | | / | 35.Epilepsy | | / | 53.Catering Crew | | / |
| 15.Marked change in bowel habits | | / | 36.Joint/spinal trouble | | / | 54.Confine Space Entry | | / |
| 16.Blood in stools (motions) | | / | 37.Surgical operation | | / | 55.Working at Height | | / |
| 17.Dental Problem | | / | 38.Serious accident / injury | | / | Social History | | |
| 18.Piles (Haemorrhoid) | | / | 39.Tropical disease | | / | 56.Do you smoke? | | / |
| 19.Hernia | | / | 40.Fear of heights | | / | 57. History of drug abuse | | / |
| 20.Varicose Veins | | / | 41. Fear of being enclosed in a small space | | / | 58.Do you drink alcohol? If yes, amount per week? 3 CANS BEER | / | |
| 21.Lump in breast / arm pit | | / | 42. Are you currently taking Any medication? | | / | 59. Have you been medical disembarked from offshore within the past 2 years? If yes, please specify: | | / |
| | | | | | | 60. Other illness not mentioned above. If yes, please specify: | | / |
| Have any of your family members suffered from the following? | | | | | | | | |
| 61.Diabetes | | / | 64.Heart Disease | | / | 67.Hypertension | / | / |
| 62.Tuberculosis | | / | 65.Epilepsy | | / | 68.Stroke | / | / |
| 63.Bronchial Asthma | | / | 66.Cancer | | / | 69.Blood Disease | / | / |

I hereby certify that the above information is correct to the best of my knowledge. I understand that voluntary non-disclosure of any information required above is a breach of PETRONAS fitness to work requirements and may result in disciplinary action against me. I further agree to give consent to the examining medical professionals to disclose the results of this medical questionnaire and associated medical examination details to PETRONAS, Petroleum Arrangement Contractor (PAC) and my Employer for managing all matters related to my Fitness to Work Offshore and/or Remote Onshore Worksite.

Signature:

Name

Date:

SECTION 2 – FOR USE BY EXAMINING DOCTOR

Note: MPM AME shall enter the FTW Status into MPM E-Reporting System (MySDS) and retained a record for future reference.

| HEIGHT (Meter) | WEIGHT (Kilogram) | BMI (Kg/m ²) | BLOOD PRESSURE | PULSE | VISION | COLOUR VISION | BLOOD GROUP |
|-------------------|----------------------|---|------------------------------------|--|---------------------|------------------|----------------|
| 1.61 | 81.5 | 31.32 | 119/75 | 60 | Distance 0.5 Near 0 | N | O+ve |
| N | A | DESCRIPTION | | MEDICAL EXAMINATION - Detail of findings | | | |
| / | | 1. Eyes & Pupils | | <p>WC - 93 cm.</p> <p>examining for heart risk score 2.8%</p> <p>lt elbow of heart - # lt elbow in childhood - 20m - normal.</p> | | | |
| / | | 2. Ear/Nose/Throat | | | | | |
| / | | 3. Teeth & Gum | | | | | |
| / | | 4. Mouth | | | | | |
| / | | 5. Respiratory | | | | | |
| / | | 6. Cardiovascular System | | | | | |
| / | | 7. Abdomen | | | | | |
| / | | 8. Hemial Orifices | | | | | |
| / | | 9. Extremities | | | | | |
| / | | 10. Musculo-skeletal | | | | | |
| / | | 11. Skin & Varicose Veins | | | | | |
| / | | 12. Neurological | | | | | |
| / | | 13. Breasts | | | | | |
| / | | 14. Anus & Rectum | | | | | |
| / | | 15. Genito-Urinary Systems | | | | | |
| / | | 16. Others | | | | | |
| N | A | TEST | INVESTIGATION FINDINGS | | | | |
| / | | 1. Complete Blood Count | | | | | |
| / | | 2. BUSE | | | | | |
| / | | 3. Serum Creatinine | | | | | |
| / | | 4. Fasting Serum Lipid | LDL 3.48 mmol/L | | | | |
| / | | 5. Fasting Blood Sugar (HBA1c if indicated) | | | | | |
| / | | 6. Urinalysis | | | | | |
| / | | - Urine Drugs a. Amphetamine b. Benzodiazepines c. Cannabis d. MDMA e. Opiates f. Cocaine | | | | | |
| / | | 8. Audiometry | Bd 15 - at 0.5 Hz, 25 Hz at 4.6 Hz | | | | |
| / | | 9. Chest X-ray | normal | | | | |
| / | | 10. ECG (40 years and above or clinically indicated) | | | | | |
| / | | 11. Spirometry (if clinically indicated) | | | | | |
| / | | 12. Others | | | | | |

N = Normal A = Abnormal

Advised on diet/exercise/reduce body wt.
 repeat fasting lipids after 6 mths.

Courier Run: M11

Patient Details

UR:

WILLIE TINGAI

MIRI

DOB : 27/03/88

Sex: Male

ID No.: 880327526353 Age: 35 Years

Collected: 27/02/24 09:00 Ward:

Referred : 27/02/24 Yr Ref.:154210

Doctor Details

DR SUBRAMANIAM P L

COLUMBIA ASIA HOSPITAL-MIR

LOT 1035-1039 JLN BULAN SA

CDT 155

MIRI SRW 98009

Lab No.:24-7015543-I

GENERAL SCREENING P.CAPNUA PROFILE**BLOOD BANK**

SPECIMEN: BLOOD

BLOOD GROUP

Group: O Rh(D) POSITIVE

HAEMATOLOGY

SPECIMEN: WHOLE BLOOD

| | | |
|------------------|--------------------------|-------------|
| Haemoglobin | 154 g/L | (130-170) |
| RBC | $5.38 \times 10^{12}/L$ | (4.60-6.10) |
| PCV | 0.48 L/L | (0.40-0.50) |
| MCV | 89 fL | (80-100) |
| MCH | 29 pg | (27-32) |
| MCHC | 323 g/L | (300-350) |
| RDW | 12.4 % | (11.0-15.0) |
| White Cell Count | $5.8 \times 10^9/L$ | (4.0-10.0) |
| Neutrophils | 56 % $3.3 \times 10^9/L$ | (2.0-7.0) |
| Lymphocytes | 34 % $2.0 \times 10^9/L$ | (1.0-4.0) |
| Monocytes | 7 % $0.4 \times 10^9/L$ | (0.2-1.0) |
| Eosinophils | 2 % $0.12 \times 10^9/L$ | (0.02-0.50) |
| Basophils | 1 % $0.06 \times 10^9/L$ | (0.00-0.10) |
| N:L Ratio | 1.65 | (0.79-3.53) |
| Platelets | $332 \times 10^9/L$ | (150-410) |

CC Drs: SUBRAMANIAM P L.

COMPUTER GENERATED REPORT - NO SIGNATURE REQUIRED

Printed On: 27/02/24

At: 13:22

Run#: 28651

Page#: 1

Courier Run: MI1

Patient Details

WILLIE TINGAI

UR:

MIRI

DOB : 27/03/88

Sex: Male

ID No.: 880327526353

Age: 35 Years

Collected: 27/02/24

09:00

Ward:

Referred : 27/02/24

Yr Ref.:154210

Doctor Details

DR SUBRAMANIAM P L

COLUMBIA ASIA HOSPITAL-MIR

LOT 1035-1039 JLN BULAN SA

CDT 155

MIRI SRW 98009

Lab No.:24-7015543-2

LIPID STUDIES

Date: 27/02/24
Request: 7015543

| | | |
|---------------------|-------------|-----------------|
| Total Chol. | 5.1 | mmol/L (< 5.2) |
| Triglyceride | 0.88 | mmol/L (< 1.70) |
| HDL Chol. | 1.22 | mmol/L (> 1.00) |
| LDL Chol. | <u>3.48</u> | mmol/L (< 2.60) |
| Non-HDL Cholesterol | <u>3.88</u> | mmol/L (< 3.40) |
| TCchol/HDL Ratio | 4.2 | (< 5.0) |
| (Risk factor) | | |

| Global Risk | Target LDL-C Level | Target non-HDL-C Level |
|---|---|---|
| Low CV Risk | <3.0 | <3.8 |
| Moderate CV Risk | <2.6 | <3.4 |
| High CV Risk | <=1.8 and a reduction of >50% from baseline | <=2.6 and a reduction of >50% from baseline |
| Very High CV Risk | <=1.4 and a reduction of >50% from baseline | <=2.2 and a reduction of >50% from baseline |
| Recurrent CV events within 2 years despite achieving LDL-C target of <1.4mmol/L | <1.0 | |

Note: CV risk is assessed using the FRS- General CVD Risk Score
<https://www.framinghamheartstudy.org/fhs-risk-functions/cardiovascular-disease-10-year-risk/>

Reference: 2023 Clinical Practice Guidelines for the Management of Dyslipidemia (6th Edition). Kuala Lumpur: Joint Publication of the Ministry of Health Malaysia, Academy of Medicine Malaysia, National Heart Association of Malaysia.

National Heart Foundation recommends a cholesterol level < 5.1 mmol/L. Ref.ranges for lipids are in accordance with NCEP ATPIII guidelines for optimal lipid levels.

CC Drs: SUBRAMANIAM P L.

COMPUTER GENERATED REPORT - NO SIGNATURE REQUIRED

Printed On: 27/02/24

At: 13:22

Run#: 28651

Page#: 2

Courier Run: MI1

Patient Details

UR:

WILLIE TINGAI

MIRI

DOB : 27/03/88

Sex: Male

ID No.: 880327526353 Age: 35 Years

Collected: 27/02/24 09:00 Ward:

Referred : 27/02/24 Yr Ref.:154210

Doctor Details

DR SUBRAMANIAM P L

COLUMBIA ASIA HOSPITAL-MIR

LOT 1035-1039 JLN BULAN SA

CDT 155

MIRI SRW 98009

Lab No.:24-7015543-1

Note: Effective 15/01/2024, changes in Lipids reference cut off.

| | <u>SI Units</u> | <u>Conventional Units</u> |
|------------|------------------------------|---------------------------|
| Sodium | 137 mmol/L (135-145) | 137 meq/L (135-145) |
| Potassium | 4.5 mmol/L (3.5-5.1) | 4.5 meq/L (3.5-5.1) |
| Chloride | 101 mmol/L (95-110) | 101 meq/L (95-110) |
| Urea | 5.4 mmol/L (2.5-8.0) | 33 mg/dl (15-48) |
| Creatinine | 91 umol/L (50-116) | 1.03 mg/dl (0.57-1.31) |
| eGFR | 97 mL/min/1.73m ² | |
| Uric Acid | 0.45 mmol/L (0.18-0.47) | 7.5 mg/dl (3.0-7.9) |

An eGFR(CKD-EPI)- Normal (≥ 90 mL/min/1.73 m²)

NOTE:

EGFR is NOT VALID for pregnant women, dialysis patients and/or teenagers under 18 years of age.

Result should be interpreted alongside clinical presentation and in reference to KDIGO 2012 CKD Guidelines and the Malaysian Clinical Practice Guidelines for the Management of Chronic Kidney Disease 2nd Edition (2018).

CC Drs: SUBRAMANIAM P L.

COMPUTER GENERATED REPORT - NO SIGNATURE REQUIRED

Printed On: 27/02/24

At: 13:22

Run#: 28651

Page#: 3

Courier Run: MI1

Patient Details

WILLIE TINGAI

UR:

MIRI

DOB : 27/03/88

Sex: Male

ID No.: 880327526353 Age: 35 Years

Collected: 27/02/24 09:00 Ward:

Referred : 27/02/24 Yr Ref.:154210

Doctor Details

DR SUBRAMANIAM P L

COLUMBIA ASIA HOSPITAL-MIR

LOT 1035-1039 JLN BULAN SA

CDT 155

MIRI SRW 98009

Lab No.:24-7015543-I

SERUM/PLASMA GLUCOSE

Glucose 5.0 mmol/L (3.9 - 6.0)

Specimen collected 0900 h

Specimen type Fasting

Interpretation:

Category Fasting Plasma Glucose (mmol/L)

Normal 3.9 - 6.0

IFG (Prediabetes) 6.1 - 6.9

DM ≥ 7.0

IFG = Impaired Fasting Glucose; DM = Diabetes Mellitus

Recommend Oral Glucose Tolerance Test (OGTT) for fasting plasma glucose levels 6.1 - 6.9 mmol/L.

Source: 2020 Clinical Practice Guidelines for the Management of Type 2 Diabetes Mellitus (6th Edition). Kuala Lumpur: Joint Publication of the Ministry of Health Malaysia, Academy of Medicine Malaysia, Malaysian Endocrine & Metabolic Society and Diabetes Malaysia.

CC Drs: SUBRAMANIAM P L.

COMPUTER GENERATED REPORT - NO SIGNATURE REQUIRED

Printed On: 27/02/24

At: 13:22

Run#: 28651

Page#: 4

Courier Run: MI1

Patient Details

UR:

WILLIE TINGAI

MIRI

DOB : 27/03/88

Sex: Male

ID No.: 880327526353

Age: 35 Years

Collected: 27/02/24

09:00

Ward:

Referred : 27/02/24

Yr Ref.:154210

Doctor Details

DR SUBRAMANIAM P L

COLUMBIA ASIA HOSPITAL-MIR

LOT 1035-1039 JLN BULAN SA

CDT 155

MIRI SRW 98009

Lab No.:24-7015543-I

URINE FEME

Urine Appearance

Transparency

Clear

Colour

Pale Yellow

CHEMISTRY

SG:

1.020

(1.004-1.030)

pH:

6.0

(4.8-7.4)

Leucocytes:

Nil

(Nil)

Blood:

Nil

(Nil)

Nitrite:

Negative

(Negative)

Ketones:

Nil

(Nil)

Bilirubin:

Nil

(Nil)

Urobilinogen

Nil

(Nil)

Protein:

Nil

(Nil)

Glucose:

Nil

(Nil)

MICROSCOPY

Leucocytes

0 x 10⁶/L(<10 x 10⁶/L)

Erythrocytes

0 x 10⁶/L(< 5 x 10⁶/L)

Epithelial Cells

Nil

(Nil)

No casts or crystals seen.

REPORT COMPLETEDPLEASE FILE

Tests Requested:

BLOOD GROUP, HAEMATOLOGY GENERAL, LIPID STUDIES, MULTIPLE BIOCHEM ANALYSIS,
GLUCOSE, SERUM/PLASMA, GLUCOSE, SERUM/PLASMA, URINE MICRO 10 PARAMETERS

CC Drs: SUBRAMANIAM P L.

COMPUTER GENERATED REPORT - NO SIGNATURE REQUIRED

Printed On: 27/02/24

At: 13:22

Run#: 28651

Page#: 5

**Person Tested :**
 (Identified using recommended identification document Y ☐ N ☐)

Specimen ID : 6831

| Name: | Company: | Contact Number: | Occupation: | Signature: |
|---------------|----------------------|-----------------|---------------------|------------|
| WILLIE TINGAI | SEA LANE SHIPING S/B | 016-8622107 | CREWING COORDINATOR | |

Test Kit No: 0000759165 Expiry Date: 17/7/2025 Time of Collection (12hrs clock): 10:27am

Date of Test: 27/2/2024 Time of Testing: 10:30am

 Time of Retesting: ~ Specimen ID: ~
 (Under direct observation if first sample invalid / tampered)
Type of test:

☐ Pre-employment ☐ With Cause ☐ Post Accident ☐ Periodic ☐ Random
☐ Pre-deployment / Mobilisation ☒ Others (Please specify) Offshore

 Location of Sample Collection & Testing: ☒ Inhouse ☐ Mobile (Place) CAMP

 AMRO Collection Officer: Willie MRO / Doctor: Subra
Substances Test For

| | Negative | Positive |
|-----------------------|----------|----------|
| Opiates (OPI) | / | |
| Marijuana (THC) | / | |
| Amphetamines (AMP) | / | |
| Benzodiazepines (BZO) | / | |
| MDMA (Ecstasy) | / | |
| Cocaine (COC) | / | |
| Barbiturates (BAR) | | |
| Phencyclidine (PCP) | | |
| Propoxyphene (PPX) | | |
| Methadone (MTD) | | |
| Others: | | |

* A positive screening test is conventionally declared as NON-NEGATIVE and needs to be sent for confirmatory testing

It is confirmed that;

A. The candidate has tested negative to all substances of abuse

☒ (tick).

B. The candidate is tested positive (Non-negative for):

☐ (tick).

Screening tests validated / verified by

Dr. Subramanian A/L R M Palaniappan

M.M.C Reg.no-30718, DOSH Reg.no HQ/08/DOC/00/334

MPM NO: 036, OGU PIN No: OGU/2020/2812

M.B.B.S. (INDIA)

Occupational Health Doctor (MOOSH)

 Resident Medical Officer
 Columbia Asia Hospital, Miri

Date: 27/2/2024

COLUMBIA ASIA HOSPITAL MIRI

Wholly Owned By TRUEPEACE SDN BHD

LOT 1035-1039, JALAN BULAN SABIT, CDT 155

085437755085425677

RADIOLOGY REPORT

Name : WILLIE TINGAI
Age : 35Y 11M 0D
Sex : MALE
MRN : MIRI-0000154210
Visit Number : V0000000001-MIRI
Date / Time : 27/02/2024 9:04:59AM
Clinic :
Ref Doctor : SUBRAMANIAM A/L R M PALANIAPPAN

PROCEDURE

CHEST PA ERECT

FINDINGS

Normal heart size and shape.
Normal pulmonary vessels.
No lung or rib lesion.
No mediastinum mass.
Visualized bony thorax and diaphragms are normal.

IMPRESSION

Normal chest radiograph.

REPORTED BY



DR.....
Dr. MAKHINDRAN SUBRAMANIAM
MBBS (INDIA), MMED (RADIOLOGY) (UKM), AM (MALAYSIA)
(MMC Reg No:27905)
Consultant Clinical Radiologist
COLUMBIA ASIA HOSPITAL MIRI

WILLIE TINGAI

MRN: MIRI-0000154210

Visit No: V0000000001-MIRI Sex: MALE

MyKAD: 880327-52-6363

DOB: 27/03/1988 Age: 35Y 11M 00



Name: WILLIE TINGAI Date: 27/02/2024 Time: 0930 AM
Job Title: CRUISING COORDINATOR Company: SEA LANE SHIPPING S/P
DOB: 27-MARCH-1988 Sex: ☒ M ☐ F NIRC/ Passport No. 880327-52-6363
Tel Contact No: HP 016-8622101 Office _____ Home _____

Occupational History

| Type of work/Industry | Job Title | Noise exposure Level (if available) | Date of Employment | | Audiogram done |
|-----------------------|-----------|--|--------------------|-------|----------------|
| | | | From | Until | |
| | | | | | |
| | | | | | |
| | | | | | |

Usage of hearing protective devices:

☐ Constant usage during exposure ☐ Partial usage ☐ Not using at all ☐ Not provided

Checklist : Tick or check one box for each question

| | Yes | No | | Yes | No |
|---|--------------------------|-------------------------------------|---|--------------------------|-------------------------------------|
| 1) Exposure to loud noise last 14 hrs | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7) Giddiness/Vertigo/Tinnitus | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2) Worked in noisy environment | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 8) Ear diseases i.e pain/discharges | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3) Any hobbies with loud noise involved | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 9) Previous ENT surgery | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4) Previous head injury/CNS infection | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 10) Recent URTI/sinusitis/air travel | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5) Exposed to ototoxic medications | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11) Family history of deafness | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6) Had mumps/measles with hearing loss | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12) Deep sea diving (occupational/recreational) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

If 'Yes' please specify _____

Otological Findings

(R) ear

☐ Normal findings
☐ Abnormal findings

(Specify) _____

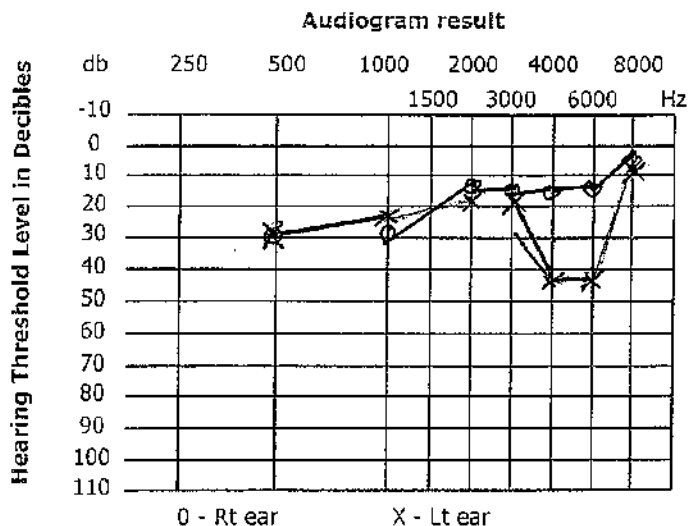
(L) ear

☐ Normal findings
☐ Abnormal findings

(Specify) _____

MRN: 154210

[AUDIOGRAM]



DOSH Approval No: **HIE 127/4/1-02/10**

Audiometer (Type) **Amplaid A177 Plus**

Date of calibration:

Average Hearing Threshold

| 0.5, 1, 2 KHZ (mean) | |
|----------------------|----|
| Right Ear | 25 |
| Left Ear | 25 |

| 2, 3, 4 KHZ (mean) | | |
|--------------------|----------|----------------|
| Right Ear | Baseline | Current |
| | | 15 |
| | Date | Date 27/2/2004 |
| Left Ear | | 28-33 |
| | Date | Date 27/2/2004 |

Conclusion:

- | | |
|--|--|
| <input type="checkbox"/> Normal | <input type="checkbox"/> Possible permanent threshold shift (FMA Act) |
| <input type="checkbox"/> Early NIHL (Not compensable) - Bilateral > 30dB at 4 and/or 6KHZ - Average (1, 2, 3 KHZ)<50dB | <input type="checkbox"/> Permanent Standard threshold shift (reportable to DOSH) - confirmed at retest after 3 months - Bilateral > 25dB mean (0.5, 1, 2, 3 KHZ) > 30dB and > age at 4KHZ - Bilateral > 10dB mean (2, 3, 4KHZ) determination compared to previous audiogram |
| <input type="checkbox"/> Proper NIHL (compensable) - Bilateral > 30dB at 4 and/or 6KHZ - Average (1, 2, 3 KHZ)<50dB | |
| <input checked="" type="checkbox"/> Others (please elaborate) | |

at $\pi = 4, 6\pi + 2\pi n$ and 3π at $0, 5\pi$

Recommendations:

- ☒ Next Audiogram in Feb (2025)
- ☐ For repeat audiogram in 3 months' time on _____ (20__)
- ☐ Kindly report case of permanent standard threshold shift to Chief Inspector, DOSH.
- ☐ Kindly refer case to SOCSO for occupational NIHL compensation claim.

Acknowledgement to examiner:

- ☒ Examiner informed to result and advice on hearing conversation given.

Type of hearing protection recommended (if applicable)

☒ Plugs ☐ Muff

Examinee's signature :

Audiogram performed by:

Signature

Audiogram evaluated by Dr. Subramanian A/L R M Palaniappan
 RAMEC, Room 202, 2nd Floor, 100, 1st Avenue, Anna Nagar, Chennai - 600 022

Signature

AMC Reg.no-30718, DOSH Reg.no HQ/08/DOC/00, Date: MPM HQ-038, DCLX SIMA

MPM NO:038, OGUK PIN No: OGUK/2020/2817

M.B.B.S. (INDIA)

Occupational Health Doctor (NIOSH)

Resident Medical Officer

Columbia Asia Hospital, Miri



KERAJAAN MALAYSIA
GOVERNMENT OF MALAYSIA

Marine Headquarters, Malaysia Marine Department, P.O Box 12, 42007 Port Klang
Tel: 03 - 3346 7777, Fax: 03 - 3168 5289, E-mail: kpgr@marine.gov.my , Website: http://www.marine.gov.my

SIJIL PEMERIKSAAN PERUBATAN
MEDICAL EXAMINATION CERTIFICATE

| | | |
|--|---|---|
| 1) Nama pemegang sijil (seperti dalam passport): Name of holder of Certificate (as in passport): | Family Name TINGAI | Given Name(s) WILLIE |
| 2) *Jantina: <u>Lelaki</u> / Wanita Gender: <u>Male</u> / Female | 3) Warganegara: Nationality: MALAYSIA | 4) No. Kad Pelaut: Seafarer Card No.: <input type="text"/> |
| 5) No. Kad Pengenalan/Passport: Identity Card No/Passport: 880327-52-6353 | 6) Tarikh Lahir (dd/mm/yyyy): Date of Birth: 27/03/1988 | |
| 7) Jawatan: Profession: MATCO | | |
| 8) Pengakuan oleh Pengamal Perubatan yang Diiktiraf: Declaration of the Recognized Medical Practitioner: | | |
| 8.1 Pengesahan dokumen pengenalan telah disemak ketika pemeriksaan: Confirmation that identification documents were checked at the point of examination: | Yes/Ya <input checked="" type="checkbox"/> | No/Tidak <input type="checkbox"/> |
| 8.2 Pendengaran menepati piawaian mengikut seksyen A-I/9 Konvensyen STCW 78 seperti dipinda Hearing meets the standards in section A-I/9 of the STCW 78 as amended | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.3 Pendengaran memuaskan tanpa apa-apa bantuan? Unaided hearing satisfactory? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.4 Ketajaman penglihatan menepati piawaian mengikut seksyen A-I/9 Konvensyen STCW 78 seperti dipinda? Visual acuity meets standards in section A-I/9 of the STCW 78 as amended? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.5 Penglihatan warna menepati piawaian mengikut seksyen A-I/9 Konvensyen STCW 78 seperti dipinda? Colour vision meets standards in section A-I/9 of the STCW 78 as amended? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| - Tarikh terakhir ujian penglihatan warna: Date of last colour vision test: 2/12/2024 | | |
| 8.6 Layak untuk tugas peninjauan? Fit for look-out duties? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.7 Tiada had atau sekatan dari aspek kecergasan? No Limitations or restriction on fitness? Jika "Tidak", nyatakan had dan sekatan: If "No", specify limitation or restrictions: <input type="text"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.8 Adakah pelaut bebas dari apa-apa keadaan perubatan yang mungkin dimudharatkan melalui perkhidmatan laut atau boleh menyebabkan seseorang pelaut tidak layak untuk perkhidmatan sedemikian atau mungkin membahayakan kesihatan mana-mana orang di atas kapal? Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the other person on board? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Saya mengesahkan bahawa saya telah memeriksa pelaut seperti di atas mengikut standard perubatan dan penglihatan Malaysia
I certify that I have examined the above-named seafarer to standards of the medical and eyesight of Malaysia
 sepertimana dalam Kaedah-Kaedah Perkapalan Saudagar (Pemeriksaan Perubatan) 1999 seperti pindaan,
as in the Merchant Shipping (Medical Examination) Rules 1999 as amended,
 dan didapati beliau *layak atau tidak layak untuk menjalankan tugas pelaut dengan pembatasan-pembatasan berikut:
*and have found him to be *fit or unfit for seafaring subject to the following restrictions:*

9) Kategori Kecergasan Perubatan:
Category of Medical Fitness:

A

10) Tarikh pemeriksaan (dd/mm/yyyy):
Date of Examination:

02/12/2024

11) Tarikh luput sijil (dd/mm/yyyy):
Expiry date of certificate:

01/12/2026

12) Tandatangan pelaut:
Signature of seafarer:

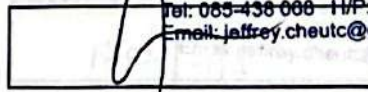


13) Nama Pengamal perubatan:
Name of medical practitioner:

Dr. Cheu Teck Geng (MMC 80240)
 Klinik Dr Cheu Sdn Bhd (666433-D)
 Suite 1.05, Lot 3608, Ground Floor, Stirling,
 Lorong Jee Foh 4, Off Jalan Bulan Sabit,
 98000 Miri, Sarawak.
 Tel: 083-438 088 H/P: 016-339 8068
 Email: jeffrey.cheutc@gmail.com



14) Tandatangan pegamal perubatan:
Signature of medical practitioner:



15) Pendaftaran MMC:
MMC Registration:

16) Cop rasmi:
Official Stamp:

- This certificate is issued by the Government of Malaysia in compliance with the requirements of Title 1.Regulation 1.2 under Maritime Labour Convention (2006)
- The maximum validity of this certificate is only two (2) years

*strikethrough whichever not applicable

PCSB PTW Level 1 Assessment

Total points 27/30 ?

PCSB PTW Level 1 Assessment to be used during the UHSE LMS unavailability period ONLY.

Total Question - 30 Questions
Minimum Passing Marks - 85% (26 Points)

Please screenshot the passed assessment mark, email, full name, date and IC number as proof of completion for CCC application.
This form only accepts Gmail (eg: abc@gmail.com) or personal company email (e.g: amar@company.com.my)

Email *

chergreaveswillie@gmail.com

0 of 0 points

First Name *

WILLIE

Last Name *

TINGAI

IC/Passport (For IC, use format - yyMMdd-####) *

880327-52-6353

Assessment Date *

MM DD YYYY

03 / 19 / 2024

Nationality *

MALAYSIA



OSP20240011633

PETRONAS

OFFSHORE SAFETY
PASSPORT






WILLIE TINGAI
880327526353

**Scan the QR Code for OSP details.*

Offshore Safety Passport Validity Date
27 Feb 2025

| | |
|-------------------------------|--|
| MEDICAL 27 Feb 2025 | Tropical BOSIET With CA EBS And Travel Safety By Boat 7 Mar 2027 |
|-------------------------------|--|



REF NO - CCC20240011445

PETRONAS

PETRONAS COMPETENCY CARD





WILLIE TINGAI
880327526353
BARGE ADMIN

**Scan the QR Code for CCC details.*

| | |
|--------------|------------------------------------|
| COMPANY NAME | MALAYSIA MARINE & HEAVY ENG (MMHE) |
| CONTRACT NO. | CHO/2018/DKS/1001 |
| APPROVED BY | KASAWARI PROJECT |

COMPETENCY CARD EXPIRY DATE
21 Mar 2026
Contractor Competency Card expiry is subjected to the earliest of training certificate

REF NO - CCC20240011445

| LIST OF COMPETENCY TRAINING | exp. date |
|--|------------------|
| PCSB PTW LEVEL 1 AWARENESS (CONTRACTORS) | 19.3.2027 |

VALID FOR APPLICATION AT PETRONAS FACILITIES ONLY



MALAYSIA SEAFARERS' IDENTITY DOCUMENT



Full Name
WILLIE TINGAI

SID no. 202474033297

Nationality
MALAYSIA

Personal ID No
880327526353

Sex
M

Date of Birth
27/03/1988


Place of Birth
SARAWAK

Date of Issue
03/12/2024

Date of Expiry
02/12/2029

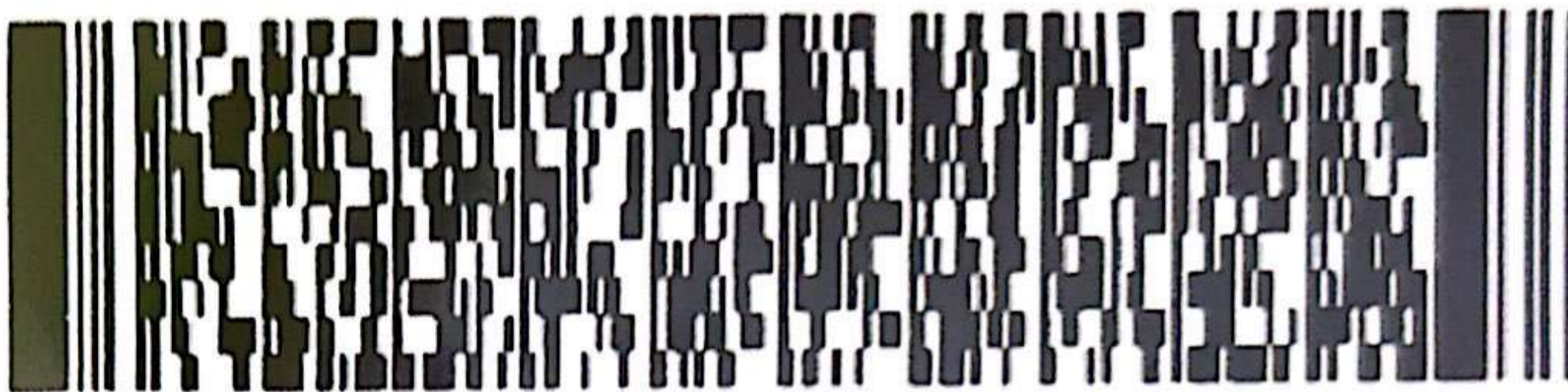
Place of Issue
MIRI

Special Character
NIL


Signature



10153119



Marine Department of Malaysia, P.O Box 12, 42007 Port Klang, Selangor, Malaysia
Tel: +603-33467777, Fax: +603-31685289, Email: kpgr@marine.gov.my

This document is a seafarers' identity document for the purpose of the Seafarers' Identity Documents Convention (Revised), 2003, of the International Labour Organization. This document is a stand-alone document and not a passport.

ISMYS10153119<7202474033297<<<
8803274M2912028MYS<<<<<<<<<<<<9
WILLIE<TINGAI<<<<<<<<<<<<<<<<<<<<<<

**BUKU PERKHIDMATAN PELAUT
SEAFARER'S RECORD BOOK**



MALAYSIA

**NOTIS
(NOTICE)**

Semua catatan di dalam Buku Perkhidmatan Pelaut ini hendaklah disahkan dengan sempurna oleh Pegawai Pelabuhan atau oleh Pegawai Konsular.

Sebarang bentuk pemalsuan, penipuan atau penyalahgunaan adalah suatu kesalahan yang boleh didakwa di Seksyen 78, Ordinan Perkapalan Saudagar 1952.

All entries in this Seafarer's Record Book shall be properly endorsed by a Port Officer or by a Consular Officer.

Any kind of forgery, fraud or false representation is an indictable offence under Section 78, Merchant Shipping Ordinance 1952.

NO. SIRI / SERIAL NO.: **179814**

MUSTAHAK

1. Buku ini adalah hakmilik Jabatan Laut Malaysia dan boleh dibatalkan atau ditarik balik pada bila-bila masa. Butiran pelaut di dalam buku ini tidak boleh dipinda, melainkan oleh pegawai-pegawai di Jabatan Laut Malaysia.
2. Jika Buku ini dimiliki oleh sesiapa yang tidak berhak memilikinya, buku ini hendaklah diserahkan kepada Pegawai Pelabuhan atau Pegawai Konsular atau dihantar terus kepada Ibu Pejabat Laut, Peti Surat 12, 42007 Pelabuhan Klang, Malaysia.

IMPORTANT

1. This book is the property of Marine Department Malaysia and may be cancelled or withdrawn at any time. Particulars in this book shall not be altered, except by the officers of Malaysia Marine Department.
2. Should this book come into the possession of any person to whom it does not belong, it shall be handed to the Port Officer or Consular Officer or directly transmitted to the Malaysia Marine Department Headquarters, P.O. Box 12, 42007 Port Klang, Malaysia.

2

**MAKLUMAT
(SEAFARER)**

**NAMA PENUH
(FULL NAME)**
WILLIE TINGAI

**NO. BUKU PELAUT
(SEAFARER BOOK NO.)**

4587418134A

3

**PELAUT
INFORMATION)**

Tinggi
(Heights)

161 cm

Warna Mata
(Colour of Eyes)

BROWN



Tanda Di Badan
(Distinguishing Marks)

NIL

T/tangan Pemegang
(Signature of Holder)



T/tangan Pegawai Pengeluar
(Signature of Issuing Officer)

Tarikh Dikeluarkan
(Date of Issue)

03/12/2024

Tempat Pengeluaran
(Place of Issue)

MIRI

**MAKLUMAT
(SEAFARER)****MAKLUMAT PELAUT
(SEAFARER INFORMATION)**

| | |
|---|---|
| NAMA: (NAME) | WILLIE TINGAI |
| NO. PELAUT: (SEAFARER NO.) | 202474033297 |
| NO. KAD PENGENALAN: (NRIC NO.) | 880327526353 |
| NO. PASSPORT: (PASSPORT NO.) | |
| ALAMAT: (ADDRESS) | LOT 11869 LORONG BUDAYA 2D TAMAN JELITA TAMAN TUNKU 98000 MIRI SARAWAK |
| TARIKH DAN TEMPAT LAHIR: (PLACE AND DATE OF BIRTH) | 27/03/1988 SARAWAK |
| NO. TEL: (TEL NO.) | 0168622101 |

**PELAUT
INFORMATION)****MAKLUMAT WARIS
(NEXT OF KIN INFORMATION)**

| | |
|---|---|
| NAMA: (NAME) | SON TINGAI |
| HUBUNGAN: (RELATIONSHIP) | BROTHER |
| ALAMAT JIKA LAIN DARI PEMEGANG: (ADDRESS IF DIFFERENT FROM HOLDER) | LOT 11869 LORONG BUDAYA 2D TAMAN JELITA TAMAN TUNKU 98000 MIRI SARAWAK |



PETRONAS

Certificate of Recognition

In Recognition of Outstanding Contribution to the



HOOK UP COMMISSIONING FOR EPIC OF KASAWARI GAS DEVELOPMENT PROJECT

KSDP-A & KSCPP 2023/2024



Kasawari
OIL & GAS DEVELOPMENT PROJECT

This certificate is awarded to

WILLIE TINGAI (IC: 880327-52-6353)

MATERIAL COORDINATOR / BARGE ADMINISTRATION

MALAYSIA MARINE & HEAVY ENGINEERING [MMHE]

for their exceptional dedication, hard work, and significant contributions to the successful completion of the HOOK UP COMMISSIONING FOR EPIC OF KASAWARI GAS DEVELOPMENT PROJECT. Their commitment to excellence, teamwork, and professionalism has been invaluable to the project's success.

Yours faithfully,

NAME: WAHYUDI BIN YUSUF

POSITION: OFFSHORE TEAM LEADER

COMPANY: MMHE SDN BHD

Yours faithfully,

NAME: MOHD RODHI BIN BAKAR

POSITION: COMPANY SITE REPRESENTATIVE

COMPANY: PETRONAS CARIGALI SDN BHD





WATJKAH PERLANTJKAN

*Adalah Dengan Oni Dianugerahkan Sijil Oni
Kepada*

**WILLIE TINGAI
BA08110188**

Kerana Telah Dilantik Sebagai

ANK SUKAN KONTOO

**TAMU GADANG KE-12
UNIVERSITI MALAYSIA SABAH**

Yang Berlangsung Pada

5-12 Oktober 2010

"BERTEKAD CEMERLANG"



PROF. MADYA DR. HJ KASIM HJ MD. MANSUR
Timbalan Naib Canselor (HEPA)
Universiti Malaysia Sabah



MAJLIS SUKAN NEGERI SARAWAK

Sijil Penyertaan

Adalah disahkan bahawa
WILLIE TINGAI

telah menghadiri

KLINIK PEMBANGUNAN SUKAN

pada

07 NOVEMBER 2006

hingga

08 NOVEMBER 2006

di

MARUDI

Tarikh:

03 NOVEMBER 2006


Pengarah
Majlis Sukan Negeri Sarawak
(FRANCIS NYURANG DING)



SIJIL PENGHARGAAN

kepada

Willie Tinggai

880327-52-6353

di atas

sumbangan menjayakan aktiviti


KEMBINA INSAN

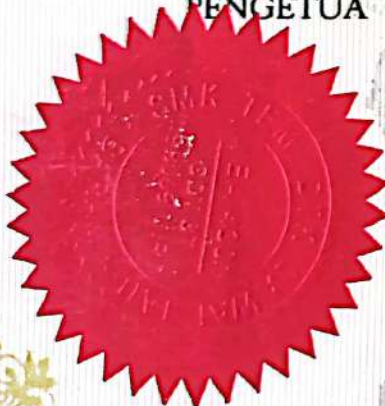
(MOTIVASI TINGKATAN 3 & 5)

15-17 Julai 2005

anjukan

Bimbingan & Kaunseling


(MERING JOCK ENG)
PENGETUA





JABATAN LAUT WILAYAH SARAWAK

Sijil Penyerlaan

Dengan ini mengesahkan

Willie Tingai

Telah menghadiri

KURSUS PEMANTAPAN SISTEM DOKUMEN PELAUT (SDPx)

Pada

20 MAC 2012

Bertempat di

MEGA HOTEL, MIRI



[HJ. ZAHIDIN BIN HJ. DOR]
Pengarah Laut Wilayah Sarawak

Bil: SH / TDLJ / 05



**SEKOLAH MENENGAH KEBANGSAAN
TEMENGGONG DATUK LAWAI JAU,
LONG SAN, BARAM**

Sijil Penyertaan

*Bahawasanya sijil ini disampaikan
kepada*

.....
WILLE TINGAI

*sebagai tanda penyertaan / penglibatan
beliau sebagai*

WAKIL SEKOLAH: MSSG MIRI
.....
.....
.....

*dalam tahun 20*⁰⁵





(
MERING JOCK ENG
)

**PENGETUA,
SMK TEMENGGONG DATUK LAWAI JAU**

30.9.05

Tarikh:

Bil: **S-P/TDLJ/ (170/03)**



**SEKOLAH MENENGAH KEBANGSAAN
TEMENGGONG DATUK LAWAI JAU,
LONG SAN, BARAM**

Sijil Penghargaan

*Bahawasanya sijil ini disampaikan
kepada*

WILLIE TINGAI

*sebagai tanda penghargaan sekolah ini atas
bantuan dan sumbangannya sebagai*

Athlit MSSBM 2003 (MIRI)

dalam tahun 20.....03.



Tarikh: **03.10.2003**


MERING JOCK ENG
PENGETUA,
SMK TEMENGGONG DATUK LAWAI JAU

Bil. 001/04/KDTPOL/TDLJ



SMK TEMENGGONG DATUK LAWAI JAU
LONG SAN, BARAM

Sijil Kokurikulum

Dengan ini diakui bahawa

WILLIE TINGAI


telah menyertai kegiatan-kegiatan kokurikulum seperti berikut
2003 2004
dari tahun _____ hingga tahun _____

Kegiatan
KADET POLIS

Jawatan
PRESIDEN

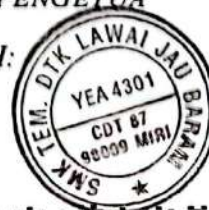
Catatan: BAIK


GURU PENYELARAS KOKURIKULUM


PENGETUA

COP SEKOLAH:

Tarikh: 25. 09. 2004



Bil: S-P/TDLJ/(070/03)



SEKOLAH MENENGAH KEBANGSAAN
TEMENGGONG DATUK LAWAI JAU,
LONG SAN, BARAM

Sijil Penghargaan

*Bahawasanya sijil ini disampaikan
kepada*

WILLIE TINGAI

*sebagai tanda penghargaan sekolah ini atas
bantuan dan sumbangannya sebagai*

Athlit Sekolah MSSMB (Miri)

03

dalam tahun 20



Tarikh: **03.10.2003**

MERING JOCK ENG

PENGETUA,
SMK TEMENGGONG DATUK LAWAI JAU

Dengan Sukacitanya Menganugerahkan
Sijil Penghargaan



Menjayakan Projek Pertanian Sekolah
2004

En. Mering Jock Ing
Pengetua SMK Temenggong
Datuk Lawai Jau

A handwritten signature in black ink, appearing to be 'En. Mering Jock Ing', written over a horizontal line.



Bil. *S-Ko/TDLJ/(033/03)*



**SMK TEMENGGONG DATUK LAWAI JAU
LONG SAN, BARAM**

Sijil Kokurikulum

Dengan ini diakui bahawa


WILLIE TINGAI

telah menyertai kegiatan-kegiatan kokurikulum seperti berikut
dari tahun.....hingga tahun.....**2003**

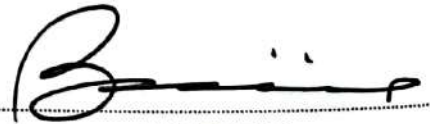
Kegiatan

Jawatan

Catatan: **Persatuan Kadet Polis** **Komander**


GURU PENYELARAS KOKURIKULUM

Tarikh: **03.10.2003**


PENGETUA
COP SEKOLAH:



Bil: *S-P/TDLJ/(177/03)*



SEKOLAH MENENGAH KEBANGSAAN
TEMENGGONG DATUK LAWAI JAU,
LONG SAN, BARAM

Sijil Penghargaan

*Bahawasanya sijil ini disampaikan
kepada*

WILLIE TINGAI

*sebagai tanda penghargaan sekolah ini atas
bantuan dan sumbangannya sebagai*

AJK Majalah Sekolah (Ketua Editor)

03

dalam tahun 20



03.10.2003

Tarikh: _____

MERING JOCK ENG

**PENGETUA,
SMK TEMENGGONG DATUK LAWAI JAU**

Bil: *S-P/TDLJ/(093/03)*



SEKOLAH MENENGAH KEBANGSAAN
TEMENGGONG DATUK LAWAI JAU,
LONG SAN, BARAM

Sijil Penghargaan

*Bahawasanya sijil ini disampaikan
kepada*

WILLIE TINGAI

*sebagai tanda penghargaan sekolah ini atas
bantuan dan sumbangannya sebagai*

Pengawas Lelaki (Sesi 2002- 2003)

dalam tahun 20 **03** *.....*



Tarikh: **03.10.2003**


MERING JOCK ENG
PENGETUA,
SMK TEMENGGONG DATUK LAWAI JAU

Bil: 184.../TDLJ... (SP). / 02



**SEKOLAH MENENGAH KEBANGSAAN
TEMENGGONG DATUK LAWAI JAU,
LONG SAN, BARAM**

Sijil Penghargaan

*Bahawasanya sijil ini disampaikan
kepada*

.....
WILLIE TINGAI

*sebagai tanda penghargaan sekolah ini atas
bantuan dan sumbangannya sebagai*

.....
WAKIL SEKOLAH KE MSSMB (MIRI - BINTULU))
.....
.....

dalam tahun 2002.....



Tarikh: 05 OKT 2002.....

.....

.....
**EN. MERING JOCK ENG
PENGETUA,
SMK TEMENGGONG DATUK LAWAI JAU**

Bil: ..197../TDLJ(SR)/ 02



**SEKOLAH MENENGAH KEBANGSAAN
TEMENGGONG DATUK LAWAI JAU,
LONG SAN, BARAM**

Sijil Penghargaan

*Bahawasanya sijil ini disampaikan
kepada*

.....**WILLIE TINGAI**.....

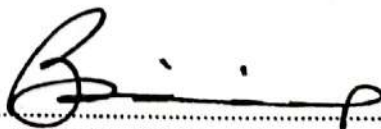
*sebagai tanda penghargaan sekolah ini atas
bantuan dan sumbangannya sebagai*

.....**WAKIL BAHAGIAN KE MSSS DI SRI AMAN**.....

dalam tahun 20..02.....



Tarikh: ...5...**OKTOBER**...2002.....



(**MERING JOCK ENG**)

**PENGETUA,
SMK TEMENGGONG DATUK LAWAI JAU**

Bil. 38 / TDLJ / SK / 02



**SMK TEMENGGONG DATUK LAWAI JAU
LONG SAN, BARAM**

Sijil Kokurikulum

Dengan ini diakui bahawa

WILLIE TINGAI

telah menyertai kegiatan-kegiatan kokurikulum seperti berikut
dari tahun 2002 hingga tahun -

Kegiatan

Jawatan

KADET POLIS

BENDAHARI

Catatan: AKTIF DAN BERTANGGUNGJAWAB

DEDIKASI TERHADAP TUGAS.


GURU PENYELARAS KOKURIKULUM


PENGETUA

COP SEKOLAH:



Tarikh: 05 OKT 2002

Bil: 01/KOKURTIKULUM/TDLJ/2001



**SEKOLAH MENENGAH KEBANGSAAN
TEMENGGONG DATUK LAUAI JAU,
LONG SAN, BARAM**

Sijil Penghargaan

*Bahawasanya sijil ini disampaikan
kepada*

WILLIE TINGAI

*sebagai tanda penghargaan sekolah ini atas
bantuan dan sumbangannya sebagai*

OLAHRAGAWAN SEKOLAH BAGI TAHUN 2001

dalam tahun 2001.....



Tarikh: 20 OKTOBER 2001

EN. MERING JOCK ENG
PENGETUA,
SMK TEMENGGONG DATUK LAUAI JAU

Bil: 21/KOKO/TDLJ/01



**SEKOLAH MENENGAH KERAJAAN
TEMENGGONG DATUK LAWAI JAU
LONG SAN, BARAM**

Sijil Penghargaan

*Bahawasanya sijil ini disampaikan
kepada*

WILLIE TINGAI

*sebagai tanda penghargaan sekolah ini atas
bantuan dan sumbangannya sebagai*

ATLIT SEKOLAH MAJLIS SUKAN SEKOLAH-SEKOLAH

MENENGAH BAHAGIAN MIRI-BINTULU (MSSMB)

dalam tahun 19...2001



Tarikh: 15. 10. 2001

Berning

**MERING JOCK ENG
PENGETUA,
SMK TEMENGGONG DATUK LAWAI JAU**





SEKOLAH MENENGAH KEBANGSAAN MARUDI

Sijil Perakuan Kokurikulum

Adalah dengan ini diakui bahawa

*Willie Tingai
(880327-52-6353)*

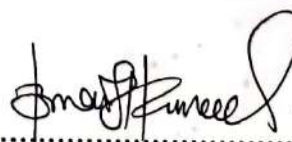
telah menyertai aktiviti kokurikulum seperti berikut:

1. Pengawas Sekolah sesi 2006 - 2007.
2. AJK Kem Kepimpinan Pengawas (Fasilitator) tahun 2007.
3. Pengerusi Kelab Olahraga tahun 2007.
4. Ahli biasa Kelab SLAD tahun 2007.
5. Ahli biasa Kelab Bola Tampar tahun 2006 - 2007.
6. Menyertai larian Saberkas Peringkat Negeri Sarawak tahun 2007.
7. Menyertai Merentas Desa Peringkat Sekolah tahun 2007.
8. Menyertai larian Kemerdekaan / larian obor tahun 2006.
9. Mewakili Sekolah dalam kejohanan MSSM tahun 2007.
10. Mewakili Bahagian Miri dalam kejohanan MSS Sarawak ke Sarikei tahun 2007.
11. Mewakili Bahagian Miri dalam Projek Sprint tahun 2007.
12. Menyertai pertandingan Bola Tampar Liga Sukan Komuniti Marudi tahun 2007.
13. Pertandingan Senam aerobik anjuran Saberkas Peringkat Negeri Sarawak tahun 2007.




(SOLIMENT NYIAN) ASP
Pegawai Penjasat Kenan 1
Jabatan Sijil Jansyah
Ibu pejabat Polis Daerah Miri

21/8/08.


Pengetua
SMK Marudi
Baram, Sarawak

Tarikh: 20.06.2008