Form 15

[See Rule 74(9) (b)]

REPORT OF EXAMINATION OR TEST OF PRESSURE VESSELS OR PLANT

- 1. Name and address of factory:-
- 2. Name, description and distinctive number of Pressure Vessel or Plant :-
- 3. Name and address of manufacturer and reference to their test certificate or certificate of competent person
- 4. Nature of process in which pressure vessel or plant is used
- 5. Particulars of Pressure Vessel or Plant
 - a). Date of Construction
 - b). Thickness of walls
 - c). Date on which the pressure vessel or plant was first taken into use
 - d). Maximum possible working pressure recommended by the manufacturer
 - e). Safe working pressure recommended by the manufacturer
- 7). Date of last -
 - (i) external examination
 - (ii) internal examination
 - (iii) hydraulic examination
 - (iv) ultrasonic test
- 8). Whether lagging was removed for purposes of examination
- 9). What parts (if any) were inaccessible?
- 10) Description of examination carried out and findings—
 - (i) External examination (give reasons if it is not carried out six monthly)
 - (ii) Internal examination (give reasons if it is not carried out annually)
 - (iii) Hydraulic test (give reasons if it is not carried out at interval of 2 years or 4 years)
 - (iv) Ultrasonic test (please quote number and date of the certificate issued by Chief Inspector, permitting ultrasonic test in lieu of internal examination and hydraulic test).
- 11) Safe working pressure calculated as per methods given in sub-rule 5 \odot (ii) for sizing cylinders
- 12). Condition of pressure vessel or Plant
 - (a) Vessel
 - (b) Piping
- 13). Condition of fittings and appliances
 - (i) Pressure Gauges

- (ii) Safety Valve
- (iii) Stop Valve
- (iv) Reducing valve (give reasons if not necessary)
- (v) Additional safety valve (required in case reducing valve is necessary)
- (vi) Other devices (please specify particularly in case of jacketed vessels).
- 14) Safe working pressure recommended by after examination
- 15) Specify repairs, if any, and periods within which they should be executed.
- 16) Specify reduced working pressure pending repairs.
- 17. Other observations / conditions subject to which the plant is to be operated

I certify that on (date) the pressure vessel or plant described above was thoroughly cleaned and (sor far as its construction permits) made accessible for through examination and for such tests as were necessary for the rough examination and that on the said date, I thoroughly examined this pressure vessel or plant, including its fittings, and that the above is a true report of my examination.

Signature :- Qualification :-

Address :-

Date :-

(If employed by a company or association, name and address of the company or association).