

FORM NO. 11

(Prescribed under rule 61)

REPORT OF EXAMINATION OR TEST OF PRESSURE VESSEL OR PLANT

Registration Number :
Licence Number :
NIC Code Number :
(as given in the Licence)

01. Occupier (or owner) of premises :

02. Address :

03. Name, description and distinctive
number of pressure vessel or plant :

04. Name and address of manufacturer :

05. Nature of process (including temp.
and pressure parameter) :

06. particulars of pressure vessels or
plant.
(a) Date of Construction :
(b) Thickness of walls :
(c) Date on which it was first taken
into use. :
(d) Safe working pressure :
recommended by the manufacturer

07. Date of
(a) Last external examination :
(b) Last internal examination :
(c) Last hydraulic examination :
(d) Last ultrasonic or other
nondestructive test :

08. Whether lagging was removed for
purpose of examination :

09. Description of examination
carried out and findings
(a) External examination :
(give reason if it is not carried
out six monthly)
(b) Internal examination :
(give reason if it is not carried
out annually)
(c) Hydraulic test :
(give reason if it is not carried out
at an interval of two years)
(d) Ultra-sonic or other nondestructive
test :

10. Condition of pressure plants :
(a) Vessel :
(b) Piping :

11. Condition of fittings and applications. :
- (a) Pressure Gauge :
- (b) Safety Valve :
- (c) Stop Valve :
- (d) Reducing Valve :
(give reasons if not necessary.) :
- (e) Additional Safety Valve :
(required in case reducing valve is
necessary.) :
- (f) Other Devices :
(Please specify particularly in case
of jacketed vessels.) :
12. Safe working pressure recommended :
after examinations (specify the
allowances made for conditions of
working such as heat, corrosion etc.) :
13. (a) Repairs (if any) required. :
(b) Period within which the repairs :
should be executed. :
(c) Any other condition which the :
person making the examination :
thinks it necessary for securing :
safe working. :
14. Specify reduced working pressure :
pending repairs. :
15. Safe working pressure calculated as :
per methods given in Sub-rule 8 for :
thin walled pressure vessel or plant. :
16. Other observations :

I certify that on (date) _____ pressure vessel or plant described above was thoroughly cleaned and (so far as its construction permits) made accessible for thorough examination and for such tests as were necessary for thorough 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 and name of : **SHRI SANTOSHKUMAR SADANANDAN**
Competent Person B.E. (Mech.)

Number and Date of the : **GUJ/DISH/CPT/A/0337/2013**
Competent certificate Period:

Issued by : **Mob: 9825117137, 9033067829**

Next Due Date : _____

*National Industrial Classification (NIC)

Note: The above report is issued subject to daily checking of above equipment and all its safety devices for its proper functioning and operation before use.