FORM NO. 11

(Prescribed under Rule 61)

Report of examination or test of pressure vessel or plant.

Regist	ration n	umber :					
License number :							
*NIC Code number :							
(as given in the licence)							
1.	Occupier (or owner) of premises :						
2.	Addres	SS	:				
3.	Name,	description and distinctive number	:				
	of pres	ssure vessel or plant.					
4.	Name and address of manufacture :						
5.	Nature	of process(including temperature	:				
	and pressure parameters)						
6.	Particu	ılars of pressure vessel 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 manufacture					
7.	Date of –						
	(a)	Last external examination	:				
	(b)	Last internal examination	:				
	(c)	Last hydraulic examination	:				
	(d)	Last ultra-sonic or other	:				
		non-destructive test.					
8.	Whether lagging was removed for		:				
	purpos	se of examination.					
9.	Descri	ption of examinations carried out	:				
	and findings.						

	(a)	External examination	:	
		(give reason if it is not carried out		
		six monthly)		
	(b)	Internal examination	:	
		(give reasons if it not carried out		
		annually)		
	(c)	Hydraulic test	:	
		(give reasons if this is not carried		
		out at an interval of 2 years or 4		
		years)		
	(d)	Ultra-sonic or other	:	
		non-destructive test.		
10.	Condition of pressure plants -			
	(a)	Vessel		
	(b)	Piping		
11.	Condi			
	(a)	Pressure gauges	:	
	(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 v	:		
	exami			
	for co			
	corros			
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.			
Specify reduced working pressure pending :				
repair	S			
Safe working pressure calculated as per :				
methods given in sub-rule 8 for thin				
walled	d pressure vessel or plant.			
Other	observations.			
I certi	fy that on (date)	the 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 ex	amination.			
		Signature and name of		
		Competent person:		
		Number and date of the		
		Competency certificate:		
:		Issued by :		
	Special repair Safe walled Other I certiful description and thoroupressures.	should be executed. (c) Any other condition which the person making the examination thinks it necessary for securing safe working. Specify reduced working pressure pending repairs Safe working pressure calculated as per methods given in sub-rule 8 for thin walled pressure vessel or plant. Other observations. I certify that on (date)		

^{*}National Industrial Classification (NIC)