FORM NO. 11

(Prescribed under Rule 61)

Report of examination or test of pressure vessel or plant.

Registi	ration n	umber :			
License	e numb	er :			
*NIC (Code nu	ımber :			
(as giv	en in th	e licence)			
1.	Occupier (or owner) of premises :				
2.	Address :				
3.	Name,	description and distinctive number	:		
	of pressure vessel or plant.				
4.	Name and address of manufacture :				
5.	Nature	of process(including temperature	:		
	and pro	essure parameters)			
6.	Particu	lars 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.	Wheth	er lagging was removed for	:		
	purpos	e 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.	Conditions of fittings and appliances –				
	(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 working pressure recommended after				
	examination (specify the allowances made				
	for conditions of working such as heat,				
	corros	sion etc.)			
13.	(a)	Repairs (if any) required	:		

		should be executed.				
	(c)	Any other condition which the :				
		person making the examination				
		thinks it necessary for securing				
		safe working.				
14.	Spec	ify reduced working pressure pending :				
	repai	rs				
15.	Safe working pressure calculated as per :					
	meth	ods given in sub-rule 8 for thin				
	walle	ed pressure vessel or plant.				
16.	Other observations.					
	I cen	ify that on (date) the pressure vessel or plan				
	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					
		my e	xamination.			
		Signature and name of				
		Competent person:				
		Number and date of the				
		Competency certificate:				
Date	:	Issued by:				
*Natio	onal In	dustrial Classification (NIC)				

(b)

Period within which the repairs