

CERTIFICATE OF YEARLY TEST OF SAFETY RELIEF VALVE, INTERNAL VALVE, EXCESS FLOW VALVE

(Issued under rule 18 of SMPV(U) Rules, 1981)

Certificate No. :	Date :
I hereby certify that the safety valves and internal valve / excess flow valves have been tested as per the particulars below and found fit for use.	
1. Safety Valves :-	
(i) Identification No(s) and Size :	
(ii) Make	
(iii) Year of Manufacturer	
(iv)-(a) Fitted with pressure vessel number in the : Installation of/mounted on vehicle No.	
(iv)-(b) Name & address of Licensee	
(iv)-(c) Dockey Number	
(iv)-(d) Licence Number / Approval Number(Form III / IV / V)	
Site Address: District : State :	
(iv)-(e) Details of CCE's approval number, certificate reference number of De-gassing Station and address of place of evacuation/degassing for removal of safety valve for testing(In case of mobile vessel meant for Flammable/Toxic/Corrosive gases)	
(iv)-(f) Tested on (Date) At(Pressure) At(Place) District: State: Note : In case of Road tanker, Please upload degassing/evacuation certificate issued by CCE approved Degassing Station or Other authorized facilities otherwise this certificate will be treated as invalid.	
(iv)-(g) Observations on opening and closing of the valve and subsequent leakage, if any(Testing of the Safety Valves to be conducted as per API-527)	
(v) Observation on physical examination of the whole assembly and particularly of spring, seat ,spindle, lock nuts, valve body, threads etc.	
vi) Observation on the adequacy of the safety valve in relation to the vessel and product. (Safety valve test to be done pneumatically or hydraulically upto the set pressure followed by Pneumatic leak test as per API-527).	
2. Pipe for housing SRV (Applicable for Static installation wherein vessels are fitted with SRV having its spring on lower side towards vessel) :-	
(a) Specification of pipe: (whether seamless Schedule 40 or 80), its size and wall thickness.	
(b) Pneumatic testing of the pipe : (to be tested at set pressure of SRV) Tested at	
(c) Date of Test	
(d) Observation on physical condition and its fitness.	
3. Internal Valve with Excess Flow Device/Excess Flow Check Valves - Operational fitness test to be done once in a year for Mobile Gas Tankers & during Hydraulic test for Static Vessels and Closing Flow test to be done during testing under Rule 19 for Mobile Gas Tankers:- (Applicable for Flammable/Toxic Gas pressure Vessels)	
(i) Fitted on pressure vessel described at (1)(iv)(a) above	

(ii) Identification No.: Make: Size:	
(iii) Location of the fitting on the vessel	
(iv) Observation on the Operational Tests-for differential pressure at closing flow rate (annually-for Mobile gas Tankers & during Hydraulic Test under Rule 19 for static vessels) and Closing Flow Measurement Test using water as the medium (During periodic test under Rule 19 for Mobile gas Tanker) as per approved.	
(v) Observation on physical examination, operational fitness & adequacy of the size in relation to the vessel. The valves has to be opened from outside & examined for defects in lever ,actuation ,condition of spring, structure, threads, alignment of stem,plunger,seat,fusible link etc.	
4. Remarks (if any)	
5. Due date for the next inspection/test	
Note: This Certificate shall be generated through PESO's Online System. This Certificate shall be considered valid only when signed by Competent Person and Counter Signing Authority both.	

CERTIFICATE OF PERIODICAL HYDROSTATIC TEST ON COMPRESSED GAS ABOVE GROUND STATIC & MOBILE CYLINDRICAL VESSELS

(Issued under Rule 19 of SMPV(U) Rules, 1981)

Certificate No. :

Date :

I hereby certify that the above ground vessel/mobile vessel described below was examined by me and subjected to Non Destructive Tests and hydrostatic test and was found to have passed the examination and tests satisfactorily. Particulars are given below :-

1. Name & Address of Occupier :-

(i) Name & Address of the occupier/ owner

2. Particulars of the license under SMPV(U) Rules, 1981

(i) Site Address:

(ii) District :

(iii) State :

(iv) Dockey Number

(iv) Licence Number / Approval Number

3. Vessel particulars :-

(i) Identification Number

(ii) Fabricator,
& Year of fabrication

(iii) Third party Inspecting Agency

(iv) Design code, Pressure
(Design Pressure/Maximum Allowable working Pressure)

(v) Fabrication Drawing number
& Approval reference

(vi) Name of the compressed gas and water capacity of vessel :

4. Detailed address of place of evacuation/degassing, etc. for preparation of Flammable/Toxic/Corrosive gas Mobile vessel :-

(i) Detailed address of place of evacuation/degassing, etc. for preparation of mobile vessel, and certificate reference number issued by the CCE approved De-gassing Station.

Note: Please upload degassing/evacuation certificate issued by CCE approved Degassing Station or Other authorized facilities, otherwise this certificate will be treated as invalid.

5. Visual Examination :-

(i) Internal

(ii) External
(Observations on defects such as dents, pitting, corrosion etc. to be given clearly)

6. Ultrasonic thickness measurement (refer ASTM-E-797/SE 797) :-

	Shell (in mm)	Dished End (in mmmm)
(i) Minimum thickness observed		
(ii) Original Thickness :(a) Nominal plate thickness		
(b) Minimum calculated thickness (without C.A.)		
(c) Residual Corrosion Allowance		

Note : Thickness profile to be uploaded & attached as annexure indicating this Certificate No.

7. Wet Fluorescent Magnetic Particle Test (Refer ASTM-E-709/ASME Sec. V) :

Observations on Wet Fluorescent Magnetic Particle Test

(i) Internal (100%):

(ii) External (10%):

8. Ultrasonic Flaw Detection of Welds :-

Observations on Ultrasonic flaw Detection of Welds

(Refer ASME. Sec. V, Article 4 except that for thickness 2" or less,

calibration blocks described in Fig. T-434.2.1 shall be used) Not less than 25% of weld seams including all T. joints middle circumferential seams, Bottom & Crown weld seams	
9. Liquid Penetrate Test, wherever necessary (Refer ASTM-E-165/IS:3658) :- Observation	
10. Hardness Test :(Refer ASTM-E-110)-	
(i) Hardness Test :	
(Hardness to be measured at random on circumferential/longitudinal welds, nozzle welds and any leftover cleat weld areas)	
11. Radiographic Test, wherever necessary (To be carried out as supporting test for WFMP) :- Observation	
12. Remarks on the observations of the NDT test carried out as above	
13. Hydrotest particulars (Pneumatic test for cryogenic vessels) particulars :-	
(i) Date of Test	
(ii) Test Pressure	
(iii) Duration	
(iv) Observation	
14. Emergency shut off valves (ROV/EFV) :-	
(i) Particulars – (a) Identification Number, (b) Location on vessel, (c) Make (d) Size :	
(ii) Observation on operational fitness of excess flow valve and internal valves: Note : For the excess flow check valve and internal valves with excess flow devices, the operational fitness and flow measurement checks shall be conducted along with the periodic hydraulic test and observations shall be entered in the certificate under the Rule 18 and shall be submitted along with this certificate	
15. Pipe for Housing SRV & distance pipe from vessel - (Applicable for Static installation wherein vessels are fitted with SRVs having spring on lower side towards vessel) :-	
	SRV Housing Pipe Distance Pipe
(a) Specification of pipe: (whether seamless Schedule 40 or 80), its size and thickness.	
(b) Hydro testing of pipe (kg/cm ²) (to be tested at 1.5 times the design pressure of the vessel):	
(c) Date of Test	
(d) Observation on Physical Condition of the pipe and its fitness.	
16. Remarks	
17. Next Hydro-Testing due on :	
Note: This Certificate shall be generated through PESO's Online System. This Certificate shall be considered valid only when signed by Competent Person and Counter Signing Authority both.	
NOTE :-	
<ol style="list-style-type: none"> 1. The NDT inspections mentioned in item Nos. 7 to 11 are mandatory for all the pressure vessels of more than 100 KL water capacity. 2. The concluding remarks/observations on the findings of NDT inspections shall be mentioned in Item 12. 3. The NDT should be carried out only by persons possessing qualification of level II of ASNT/ISNT. Acceptance criteria of non-destructive test reports should be as per fabrication code. 	

4. Detailed results of NDT and observations shall be given in separate annexure
5. In case of any repair to the pressure vessel becomes necessary subsequent to NDT or otherwise, repair procedure developed by an approved fabricator and appraised by a recognized third party inspecting agency should be submitted to the Chief Controller of Explosives for prior approval before carrying out the repairs.

CERTIFICATE OF PERIODICAL HYDRAULIC TEST FOR HORTON SPHERE**(Issued under Rule 19 of SMPV(U) Rules, 1981)**

Certificate No. :

Date :

I hereby certify that the Horton Sphere described below was examined by me and subjected to Non Destructive Tests and hydrostatic test and was found to have passed the examination and tests satisfactorily. Particulars are given below :-

1. Name & Address Occupier :-

(i) Name & Address of the occupier/ owner

2. Particulars of the licence under SMPV(U) Rules, 1981

(i) Site Address :

(ii) District :

(iii) State :

(iv) Dockey Number

(v) Licence Number / Approval Number

3. Vessel particulars :-

(i) Identification Number

(ii) Fabricator,
& Year of fabrication

(iii) Third party Inspecting Agency

(iv) Design code & Pressure
(Design Pressure/Maximum Allowable Working Pressure)(v) Fabrication Drawing number
& Approval reference

(vi) Name of the compressed gas and water capacity of vessel

4. Visual Examination :-

(i) Internal

(ii) External
(Observations on defects such as dents, pitting, corrosion etc. to be given clearly)

5. Ultrasonic thickness measurement (Refer ASTM-E-797/SE 797):- (Reading are to be taken on each petal and crown plate)

	Petals (in mm)	Crown (in mm)
--	----------------	---------------

(i) Minimum thickness observed

(ii) Original Thickness : (a) Nominal plate thickness

(b) Minimum calculated Thickness (without C.A.)

(c) Corrosion Allowance

Note: Thickness profile to be uploaded & attached as annexure indicating this Certificate Number.

6. Wet Fluorescent Magnetic Particle Test (Refer ASTM-E-709/ASME Sec. V) :-

Observations on Wet Fluorescent Magnetic Particle Test

(i) Internal (100%):

(ii) External (10%):

7. Ultrasonic Flaw Detection of Welds :-

Observations on Ultrasonic flaw Detection of Welds

(Refer ASME.Sec.V, Article 4 except that for thickness 2" or less, calibration blocks described in Fig. T-434.2.1 shall be used) Not less than 25% of weld seams including all T. joints middle circumferential seams, Bottom & Crown weld seams)

8. Liquid Penetrate Test, wherever necessary (Refer ASTM-E-165/IS:3658) :-

Observation

9. Hardness Test :(Refer ASTM-E-110)-

Hardness Test :

(Hardness to be measured at random on circumferential/longitudinal welds, nozzle welds and any leftover cleat weld areas)

10. Radiographic Test, whenever necessary (To be carried out as supporting test for WFMP) :- Observation	
11. Remarks on the observations of the NDT test carried out as above	
12. Hydrotest particulars:	
(i) Date of Test:	
(ii) Test pressure	
(iii) Duration	
(iv) Observation	
13. Observation on foundation settlement during water filling at 25%, 50%, 75% & 100% water level :-	
14. Condition of the Supporting pillars, Fire proof lining etc :-	
15. Remote Operated valves and Emergency shut off valves (ROV/EFV) :-	
(i) Particulars-	
(ii) Identification Number:	
(iii) Location:	
(iv) Make:	
(v) Size	
(vi) Observation on operational fitness of ROV/EFV Note : For the ROV and excess flow check valve, operational fitness and shall also be checked and submitted in certificate under the Rule 18 along with this certificate	
16. Remarks	
17. Next Hydro-Testing due on :	
Note: This Certificate shall be generated through PESO's Online System. This Certificate shall be considered valid only when signed by Competent Person and Counter Signing Authority both.	
NOTE : -	
<ol style="list-style-type: none"> 1. The concluding remarks/observations on the findings of NDT inspections shall be mentioned in Item 11. 2. The NDT should be carried out only by persons possessing qualification of level II of ASNT/ISNT. Acceptance criteria of non-destructive test reports should be as per fabrication code. 3. Detailed results of NDT and observations shall be given in separate annexures 4. In case of any repair to the pressure vessel becomes necessary subsequent to NDT or otherwise, repair procedure developed by an approved fabricator and appraised by a recognised third party inspecting agency should be submitted to the Chief Controller of Explosives for prior approval before carrying out the repairs. 	

CERTIFICATE OF PERIODICAL HYDRAULIC TEST FOR MOUNDED AND UNDERGROUND VESSELS

(Issued under Rule 19 of SMPV(U) Rules, 1981)

Certificate No. :

Date :

I hereby certify that the Mounded/underground Pressure Vessel described below was examined by me and subjected to Non Destructive Tests and hydrostatic test pressure and was found to have passed the examination and tests satisfactorily. Particulars are given below :-

1. Name & Address Occupier :-

(i) Name & Address of the occupier/ owner

2. Particulars of the licence under SMPV(U) Rules, 1981

(i) Site Address :

(ii) District :

(iii) State :

(iv) Dockey Number

(v) Licence Number / Approval Number

3. Vessel particulars :-

(i) Identification Number

(ii) Fabricator,
& Year of fabrication

(iii) Third party Inspecting Agency

(iv) Design code & Pressure
(Design Pressure/Maximum Allowable Working Pressure)

(v) Fabrication Drawing number
& Approval reference

(vi) Name of the compressed gas and water capacity of vessel

4. Visual Examination :-

(i) Internal

(ii) External
(Observations on defects such as dents, pitting, corrosion etc. to be given clearly)

5. Ultrasonic Thickness Measurement (Refer ASTM-E-797/SE 797) :-

	Shell (in mm)	Dished End (in mm)
(i) Minimum thickness observed		
(ii) Original Thickness : (a) Nominal plate thickness (b) Minimum calculated Thickness (without C.A.) (c) Corrosion Allowance		
Note: Thickness profile to be uploaded & attached as annexure indicating this Certificate Number.		

6. Wet Fluorescent Magnetic Particle Test (Refer ASTM-E-709/ASME Sec. V) :-

Observations on Wet Fluorescent Magnetic Particle Test

(i) Internal (100%):

(ii) External (10%):

7. Ultrasonic Flaw Detection of Welds :-

Observations on Ultrasonic flaw Detection of Welds

(Refer ASME.Sec.V, Article 4 except that for thickness 2" or less, calibration blocks described in Fig. T-434.2.1 shall be used) Not less than 25% of weld seams including all T. joints middle circumferential seams, Bottom & Crown weld seams)

8. Liquid Penetrant Test, wherever necessary (Refer ASTM-E-165/IS:3658) :-

Observation

9. Hardness Test :(Refer ASTM-E-110)-	
Hardness Test :	
(Hardness to be measured at random on circumferential/longitudinal welds, nozzle welds and any leftover cleat weld areas)	
10.Radiographic Test, whenever necessary (To be carried out as supporting test for WFMPI) :- Observation	
11.Remarks on the observation of the NDT test carried out as above	
12. Hydro test particulars:(Pneumatic Test-whenever applicable):	
(i) Date of Test:	
(ii) Test pressure	
(iii) Duration	
(iv) Observation	
13.Cathodic Protection-details of the Inspections conducted and observation:-	
14. Emergency shutt off valves-Remote Operated Valves(ROV) & Flow Check Valve(EFV) :-	
(i) Particulars-	
(ii)Identification Number:	
(iii)Location:	
(iv)Make:	
(v)Size	
(vi)Observation on operational fitness Note : For the excess flow check valve, operational fitness and flow measurement observation shall also be checked and submitted in certificate under the Rule 18 along with this certificate	
15.Remarks	
16. Next Hydro-Testing due on :	
Note: This Certificate shall be generated through PESO's Online System. This Certificate shall be considered valid only when signed by Competent Person and Counter Signing Authority both.	
NOTE :-	
<ol style="list-style-type: none"> 1. The concluding remarks/observations on the findings of NDT inspections shall be mentioned in Item 11. 2. The NDT should be carried out only by persons possessing qualification of level II of ASNT/ISNT. Acceptance criteria of non-destructive test reports should be as per fabrication code. 3. Detailed results of NDT and observations shall be given in separate annexures 4. In case of any repair to the pressure vessel becomes necessary subsequent to NDT or otherwise, repair procedure developed by an approved fabricator and appraised by a recognised third party inspecting agency should be submitted to the Chief Controller of Explosives for prior approval before carrying out the repairs. 	

CERTIFICATE OF SAFETY FOR STORAGE OF COMPRESSED GAS IN VESSEL(s)**(Issued under Rule 33 of SMPV(U) Rules, 1981)**

Certificate No. :

Date :

I, hereby certify that the compressed gas installation of at District: State: has been constructed in accordance with the specification and plans approved by the Chief Controller/controller of Explosives and the conditions of the license in Form – III/ and that in my opinion the installation and foundations of the aboveground/ mounded/underground/spherical pressure vessels are of such a nature and all vessels have been so installed and secured as to ensure safety.

The particulars of the installation and examinations carried out are noted below :-

1. Vessels and fittings are as described in the annexure S1 to S6 attached herewith.

(i) Dockey Number :

(ii) Licence Number / Approval Number :

2. Fire Protection :-

(i) Number & Location of hydrant points :

(ii) Pressure in hydrant line(at the farthest point) :

(iii) Whether hose and water throwing arrangement provided, particulars thereof:

(iv) Particulars of water sprinkler system :

(v) Capacity of static fire water store or equivalent arrangement:

((vi) Observation on adequacy of the arrangement

(II) Fire Extinguishers :-

(i) Make:

(ii) Type :

(iii) Capacity :

3(a). Decanting Pump :-

(i) Make:

(ii) Specification:

(iii) Electrical Motor: Make HP/RPM/Serial Number(s):

(iv) Type of safety protection of motor(whenever required) :

3(b). Decanting Compressor :-

(i) Make:

(ii) Specification:

(iii) Electrical Motor: Make HP/RPM/Serial Number(s):

(iv) Type of safety protection of motor(whenever required) :

3(c). Dispensing Pump(for ALDS) :-

(i) Make:

(ii) Specification:

(iii) Electrical Motor: Make HP/RPM/Serial Number(s):

(iv) Type of safety protection of motor(whenever required) :

3(d). Cylinder Filling Pump/Booster Pump :-

(i) Make:

(ii) Specification:

(iii) Electrical Motor: Make HP/RPM/Serial Number(s):

(iv) Type of safety protection of motor(whenever required) :

4. Electrical Fittings :-

(Nature, Specification, Location) :

(i) Lamps :

(ii) Switches :

(iii) Switch Gear :

(iv) Junction Boxes, etc :

(v) Other fittings/Instrument/Sensors or flammable Detectors/flow meter :

(vi) Type of Wiring:

5. Pipelines & fittings :-

Location & Length (As per approved plans):	
(i)Make:	
(ii)Specification:	
(iii)Tested at pressure:	
(iv)Test Date:	
(v)Tested By:	
(vi)Depth at which buried (for ALDS):	
(vii)Fittings in the pipeline :	
(viii)Whether valves are fire safe (for ALDS) :	
(ix)Type and Make of fittings :	
(x)Suitability of the fitting :	
Upload Annexure(Additional Information related to pipelines/fittings, if any):	
6. Vapourisers :-	
Type (Electrical or Direct Fired :	
(i)Make :	
(ii)Capacity :	
(iii)Defects, if any :	
(iv)CCE Approval reference for flammable/Toxic gases :	
7. Hose pipe for decantation :-	
(i)Make/Type :	
(ii)Material of Construction :	
(iii)Test pressure :	
8.(a) Painting & External Corrosion prevention on vessel (particulars) :-	
8.(b) Cathodic protection (applicable for U/G & mounded vessel installation) :-	
(i)Type of cathodic protection and the Standard to which it conforms :	
(ii)Agency providing cathodic protection :	
(iii)Design adequacy of cathodic protection certified by :	
(iv)Details of coating and its adequacy :	
(v)Details of galvanic isolation and its adequacy:	
(vi)Details of cathodic protection monitoring box:	
9. Foundation :-	
(i)Nature & Material :	
(ii)Packing between tank foundation :	
(iii)Name of the third party inspection agency appraising the design of civil structure and fastening arrangement.	
(iv)Whether the actual construction of foundation &fastening arrangement conforms to approved design (applicable for U/G Vessel installations):	
10. Approvals from CHIEF CONTROLLER OF EXPLOSIVE (Drawing No(s), Approval Reference No. & Date) :-	Drawing No Approval No & Dates
a) Fabrication Drawing :	
b) Layout Drawing :	
c) Name of the ALDS operator & its approval reference no :	
d) Name of the ALDS installer & its approval reference No. :	
11. Earthing details :(for motor, vessels, vaporisers, unloading area etc.)	
12. Upload annexure giving additional information for ALDS,Mounded and Underground Vessels, and Certificate reference number under Rule 12(2),18 & 19 and old license number in case of re-location of old vessels	
13. Remarks, if any :	
Note: This Certificate shall be generated through PESO's Online System. This Certificate shall be considered valid only when signed by Competent Person and Counter Signing Authority both.	

ANNEXURE
TO SAFETY CERTIFICATE UNDER RULE 33 OF SMPV (U) RULES, 1981.

Certificate No:	
Annexure No. :	Annexure Date :
A. VESSEL'S PARTICULARS: -	
Identification Number:	
Fabricator's Name:	
Particulars of inspection:	
Name of Third Party Inspection Agency	
Certificate Reference Number and Date:	
Design Code:	
Design Pressure/Max.Allowable Working Pressure(Kg/Cm ² (g)):	
Design Temperature(0 _c):	
Working Pressure(Kg/Cm ² (g)):	
Water Capacity(M ³):	
Name Of the gas to be stored:	
Initial Hydraulic test done on(date)(dd/mm/yyyy):	
At(Pressure):	
By(Inspecting Agency):	
At (Pressure):	
Tested on(date):	
By (Inspecting Agency)	
Remarks on the Hydraulic Test:	
Nature of installation (Whether aboveground/mounded/underground) :	
Foundation:	
Type:	
Remarks about foundation:	
Behaviour during Hydraulic Test:	
Whethere the vessels is insulated if so, nature of insulation	
B. FITTINGS:-	
(I)Safety Relief Valve	No.1 No.2 No.3 No.4 No.5
Identification No	
Manufacturing Year	
Make	
Set Pressure	
Tested by:	
Particulars of Manufacturer's original test:	
Subsequent Testing under Rule 18 carried out by:	
On	
Vide Certificate No:	
Dated(dd/mm/yyyy):	
At Pressure	
Discharge flow rate:	
Size:	
Are size & flow rate Adequate for the vessel(Yes/No) (if No reason may be given):	
Height of Vent from Vessels & G.L:	
Whether Provided with shut-of valve:	
(II). Pipe for housing SRV & distance pipe from Vessel :-	
(i) Specification of pipe, its size and Thickness :	
(ii)Hydro-testing of Pipe(Kg/cm ²):	
(iii)Date of Test(dd/mm/yyyy)::	
(iv) Observation on Physical condition of the pipe and its fitness:	
(III). Level Gauge:-	

(i) Slip tube gauge/magnetic level gauge:	
(ii) Maximum Level Gauge: Location & Manufacturing Date:	
(iii) Rotogauge-Make,Location,Mfg Dt.	
(iv)Any other device, its particulars:	
(IV).Pressure Gauge :-	
(i)Make, Range & Date of Calibration:	
Whether excess flow valve provided:	
(ii)If yes, particulars, Make Size & Identification No.	
(V).Temperature gauge,Make & Range:	
(VI). Emergency shut off arrangement:-	
(i)Excess Flow Valve :	
(ii)Location :	
(iii)Make & Manufacturing Date Size & Closing Flow rate	
(iv)Date of last test(dd/mm/yyyy):	
(v)Whether size & closing flow rate are Adequate:	
(vi)Any other type of emergency shutt off arrangement Particulars:	
(VII). Discharge valves :-	
(i)Location, Make & Size:	
(ii)Whether fire safe, if Yes standards to which conforming (For U/G LPG/propane storage installations)	
(VIII). Drainage pipe :-	
(i)Size Mode of closure :	
(ii) Whether extended beyond shadow of vessel. if No give reasons:	
(IX). Manhole :-	
Number and Size of bolts used for fastening :	
C. Additional Note :-	
Additional Note	
Additional information, if any.	
D. Remarks, if any:	
E. Details of all other equipment installed in the premises	
Note: This Certificate shall be generated through PESO's Online System. This Certificate shall be considered valid only when signed by Competent Person and Counter Signing Authority both.	

**SAFTEY CERTIFICATE UNDER RULE 43
(ISSUED UNDER SMPV(U) RULES,1981)**

Certificate No. :

Date :

I, hereby certify that the compressed gas transport vehicle of having the particulars noted below has been examined by me at, District: State: and found to meet the requirements of Chapter IV of SMPV (U) Rules, 1981. I also certify that the vessel it's all fittings after completion of its mounting, as per approved drawing, has been tested by in my presence hydraulically at (pressure) on date at on and found free from any leakage.

1. No. and date of approval by chief controller :-

(a) Fabrication Drawing No(s)

(b) CCE,s Approval reference

(a) Mounting Drawing No

(b) CCE,s Approval reference

2. Vehicle Particulars :-

(i) Registration No.

(ii) Make, Model No. & Year of Manufacturing

(iii) Engine No.

(iv) Chassis No.

(v) Unladen weight actual (ULW).

(vi) Maximum laden weight as certified by Chassis Manufacturer

(vii) Running Gear Details:

(a) Make

(b) Chassis No.

(c) RTA Approval No.

(d) Other Details

[A]. Vessel Particulars :-

(i) Identification Number.

(ii) Fabricator's Name.

(iii) Particular of Inspection Certificate

(iv) Design code

(v) Design Pressure {kg/cm²}

(vi) Maximum Allowable Working Pressure {kg/cm²(g)}

(vii) Design Temperature (0°)

(viii) Water Capacity in liters

(ix) Name of the gas to be transported

(x) Initial Hydraulic test done on (date)

(xi) At (Pressure)

(xii) By (Inspecting Agency)

(xiii) Last Hydraulic test done on (date)

(xiv) At(Pressure)

(xv) By(Competent Person)

(xvi) Ultrasonic thickness measurement (Not applicable for new vessels)

Shells

Dish end

(a) Minimum thickness observed

(b) Nominal plate thickness

(c) Minimum Calculated thickness (without Conversion Allowance)

(d) corrosion Allowance

[B]. Fittings Particulars :-

(I) Safety Relief Valves

No.1

No.2

No.3

(a) Identification No:

(b) Manufacturing Date :

(c) Make:

(d) Size :

(e) Set pressure in kg/cm²(g):

(f) By (Inspection Agency):

yes, whether provision for stopping engine from outside made.	
(vi) Battery and cut-off switch (Nature, capacity & location):	
whether the switch is readily accessible:	
(vii) Particulars of wiring - Whether properly fixed and Protected:	
(viii) Earthing points (Construction & Location):	
Whether strong flexible table for electrical bonding, at least 5m. long and with suitable clamp/clip at each end, provided:	
(ix) Electrical wiring particulars :-	
a) How fixed with chassis & protected against damage:	
b) Whether insulated and fixed with the chassis:	
c) Whether conducted or protected suitably from physical & chemical damage:	
d) Whether all junction boxes sealed :	
e) Whether industrial type sockets are provided in case of trailer:	
(x) Clearance between and of vessel and end of rear bumper (Min. 7.5 cms.):	
(xi) Guard railing around vessel Particulars of construction:	
whether Railing is considered adequately strong:	
(xii) Fastening of vessel with Chassis Particulars of fastening:	
(a) No. of U bolts provided:	
(b) Material specification :	
(c) Lock Nut provided or not: :	
(d) Padding particulars :	
(e) Whether secured well to the Chassis:	
(f) Whether chassis is extended :	
If yes, the length extended :	
Nature of welding :	
Condition of chassis and its fittings – whether satisfactory in relation to safety of the vehicle: :	
(xiii) Bottom pipeline :-	
a) Whether pipeline between excess flow valve and discharge valve is a single piece and not pieces welded together :	
b) Whether pipelines and valves adequately secured with chassis (give particulars) & sufficiently away from moving parts of the vehicle :	
c) Mode of protection from pilferage:	
(xiv) Manhole :-	
a) Diameter :	
b) Nature of protection cover over manhole thickness and height:	
(xv) Particulars of fire extinguishers provided:	
(xvi) Whether height barrier provided on the top of driver's Cabin?	
(xvii) Whether the exhaust of the engine has been provided with spark arrestor If yes, Make,CCE's approval No. and Serial No.:	
(xviii) Emergency Kit details along with CCE approval number	
(a). Identification No :	
(b). Make :	
(c). CCE's Approval reference :	
5.Details of any other equipment mounted on the chassis of the vehicle,(pumps, compressors etc)	
6 Details like make, serial number(s),size, discharge flow rate and date of replacement of Safety valve.(Safety valve Shall be replaced once in ten years-or earlier, if found defective, for mobile Tanker vehicles carrying flammable, toxic and corrosive gases).	
7. Any other Remarks & observation:-	
Note: This Certificate shall be generated through PESO's Online System. This Certificate shall be considered valid only when signed by Competent Person and Counter Signing Authority both.	

CERTIFICATE OF HALF YEARLY EXAMINATION OF ROAD TANKERS FOR COMPRESSED GASES UNDER RULE 44(2)

Certificate No. : _____ Date : _____

I hereby certify that I have examined the road tanker having the particulars noted below and found it road-worthy and properly maintained on(Date): 24/03/2014at(Time) at Place of examination

1. Particulars of license under SMPV(U) Rules, 1981 :-

Dockey No:	
License No. / Approval No. :	
Licensee Name:	
Licensee Address :	
Valid upto:	
District :	
State :	

2. Compressed gas :-

i) Compressed gas transported (name) :	
ii) Licensed quantity of gas :	
iii) Maximum laden weight of vehicle as prescribed in license. :	

3. Vehicle Details :-

Vehicle Registration No:	
Engine No:	
Chassis No. :	

4. Last safety valve test particulars under Rule 18 :-

i) Last safety valve test particulars under Rule 18	
---	--

Certificate issued by :

i) Test date : & Pressure	
------------------------------	--

Certificate No : & Date	
----------------------------	--

ii) Hydro-test/Pneumatic-test particulars under Rule 19 :

Certificate issued by :

Test date : & Pressure	
---------------------------	--

Certificate No: & Date	
---------------------------	--

5. Examination of vehicle :-

Examination of vehicle carried out with reference to the Safety Certificate under Rule 43 issued by

Certificate No :

Certificate Date :

The vehicle was found to conform to all the particulars mentioned in the certificate expecting the following :

NEXT HALF YEARLY EXAMINATION DUE ON :

NEXT SRV TEST DUE ON :

NEXT HYD TEST DUE ON :

Remarks :

Note: This Certificate shall be generated through PESO's Online System. This Certificate shall be considered valid only when signed by Competent Person and Counter Signing Authority both.

CERTIFICATE OF CONTROL
(Rule 12(2) of SMPV(U) Rules, 1981)

Certificate No. :	Date :
1.0 Manufacture Detail :-	
1.0 Manufacture:	
1.1 Fabrication shop CCE approval No:	
1.2 Validity of shop approval No:	
Address of manufacturing unit indicating Place/Site:	
Plot No./Survey No:	
Village/Ind. Estate:	
District :	
State :	
1.4 Purchaser/for whom intended:	
1.5 Site of installation:	
1.6 Purchase order No: & Date:	
1.7 Manufacturer's drawing No1: Manufacturer's drawing No2: Manufacturer's drawing No3: Manufacturer's drawing No4:	
1.8 Chief Controller Of Explosives: Approval Reference of design drawing: Dated:	
1.9 Inspection Date(First):	
1.10 Inspection Date(Final):	
1.11 Type of construction: a) Horizontal/vertical/underground/aboveground/ Mounded Vessel of mm dia X mm length(TL to TL or WL to WL) with dish ends b)mm dia Horton Sphere	
1.12 Job or Vessels Identification No:	
2.0 Design Data:-	
2.1 Design and construction code:	
2.2 Name of compressed gas:	
2.3 Water capacity(Gross/net in case of cryogenic vessel):	Ltrs.
2.4 Maximum allowable working pressure:	Kg/cm2
2.5 Design Pressure:	Kg/cm2 (including kg/cm2 static head+ kg/cm2 External Load)
2.6 Operating Temperature:	Degree Celsius to Degree Celsius
2.7 Design Temperature:	Degree Celsius to Degree Celsius
2.8 Corrosion allowance:	mm
2.9 Joint efficiency:	
2.10 Radiography:	Longitudinal % Circumferential % T-joints % Spot %
2.11 Post weld heat treatment:	
2.12 Hydro test pressure:	
2.13 Thickness:	Shell Dish end
a) Min. calculated without CA	mm mm
b) Corrosion Allowance	mm mm
c) Nominal	mm mm
d) Actual Thickness observed	mm mm

Note: In case of cryogenic vessel, please indicate design data of inner as well as outer vessels.

3.0 Material Specification:-

Item	Specification	Origin And T.C. No.
Main Shell		
Dish ends		
Flanges		
Cover Flanges		
Coupling		
Nozzle pipe		
Pad plate		
Fasteners		
Gaskets		
Internals		
Ladder support		
Vessel support		

* Test certificates for materials are verified and found in order.

4.0 Welding Details:-

4.1 WPS/PQR/WPQ:	Procedure & performance test as per and found satisfactory
4.2 Names of qualified welders:	
4.3 Name of CCE approved third party inspecting agency who qualified the welders and validity of their performance qualification:	
4.4 Welding process:	
4.5 Welding consumables:	
4.6 Calibration Certificate, validity & make of welding machine(s):	

5.0 Inspection & Tests at Shop :-

5.1 Raw Materials:	MTCs reviewed for
5.2 Set ups:	
5.3 Magnetic practical test:	
5.4 Dye Penetrate Test:	
5.5 Ultrasonic Flaw detection:	
5.6 Radiography:	
5.7 Production Control Test Results: (weld test coupons)	
5.8 Post weld heat treatment method:	Not done Local stress relieving Witnessed on at Hrs. at Hrs.
5.9 Post weld heat treatment method:	
5.10 Review of heat treatment log sheets and charts:	
5.11 Internal and External Visual Inspection:	
5.12 Pneumatic test of RF Pads :	At Kg/cm ² (g)
5.13 Dimensional Checks:	
5.14 Dish end thickness measurement:	Minimum observed mm After Dish forming against mm minimum calculated thickness
5.15 Workmanship:	
5.16 Hydrostatic Test :	Witnessed at kg/cm ² (g) for minuts on and found satisfactory.
5.17 As built drawing:	Drawing No. Rev. "As Built" prepared by manufacturer Reviewed and endorsed
6.0 Method of support :-	
7.0 Internal equipment(s), if any:-	

8.0 Stamping on vessel:-	
8.1 Hard punch location:	
8.2 Manufacturer's Name: & Identification mark:	
8.3 Client/purchaser:	
8.4 Purchase order No:	
8.5 Job No./Item No./Equipment No.:	
8.6 year of manufacturing:	
8.7 Design Code:	
8.8 Max. Allowable Pressure:	kg/cm2
8.9 Design Pressure(In casr of cryogenic Vessel, furnished both for inner and outer vessels):	
8.10 Design Temperature:	Degree Celsius to Degree Celsius
8.11 Water capacity(gross):	Liters
8.12 Intended for:	gas service
8.13 Gas capacity(if liquefiable):	Kgs.
8.14 Radiography:	
8.15 Post weld Heat treatment:	
8.16 Hydrotest Date:	
8.17 Hydrotest Pressure:	
8.18 Inspection by:	
8.19 Inspecting Agency's stamp:	
8.20 Certificate No: Dated:	
8.21 As built drawing No:	Rev.
9.0 Conclusion:-	
Conclusion: The undersigned inspectors hereby certify that the above pressure vessel is designed, fabricated, tested and inspected during various stages of manufacturer in accordance with above said code and found fit for use for the designed service.	
Issued at:	
Issued on:	
10.0 Remarks:-	
Remarks:	
Monogram of Inspecting Agency	
Note: This Certificate shall be generated through PESO's Online System. This Certificate shall be considered valid only when signed by Competent Person and Counter Signing Authority both.	