

APPENDIX B
FORMS

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**FORM 201:
CERTIFICATE OF INSTRUCTION**

I have completed instruction of the installation of the equipment listed below:

Project: _____
Item of Equipment: _____
Tag No./Location: _____
Reference Specification: _____

(Authorized Signing Representative of the Manufacturers Representative) (Date)

I have received satisfactory instructions from the Contractor.

(Authorized Signing Representative of the Installation Contractor) (Date)

**FORM 202:
CERTIFICATE OF SATISFACTORY INSTALLATION**

I have completed inspection of the installation listed below and confirm that it is satisfactory and that deficiencies have been remedied to my satisfaction except any as noted below:

Project: _____

Item of Equipment: _____

Tag No./Location: _____

Reference Specification: _____

Outstanding Deficiencies: _____

(Authorized Signing Representative of the Manufacturer)

(Date)

**FORM 203:
CERTIFICATE OF EQUIPMENT SATISFACTORY PERFORMANCE**

We certify that the equipment listed below has been validated and has been operated for at least seven (7) consecutive days and that the equipment operates satisfactory and meets its Basic Design Criteria. No deficiencies in the equipment were found.

Project: _____

Item of Equipment: _____

Tag No./Location: _____

Reference Specification: _____

(Authorized Signing Representative of the Manufacturer) (Date)

(Authorized Signing Representative of the Installation Contractor) (Date)

(Authorized Signing Representative of the Contract Administrator) (Date)

Valve Test Record

Manufacturer Order No.: _____
Serial No.: _____

Valve Diameter: _____
Pressure Rating: _____

Hydrostatic Leakage Test - pressure applied to upstream side

- min test pressure = _____ ; min test duration = _____ minutes

Test Pressure: _____

Test Date: _____

Test Duration: _____

Gauge Number: _____

Witnessed by:

Mftr Representative _____

Signature

Print

UMA Engineering Ltd _____

Signature

Print

City of Winnipeg _____

Signature

Print

Hydrostatic Leakage Test - pressure applied to downstream side

- min test pressure = _____ ; min test duration = _____ minutes

Test Pressure: _____

Test Date: _____

Test Duration: _____

Gauge Number: _____

Witnessed by:

Mftr Representative _____

Signature

Print

UMA Engineering Ltd _____

Signature

Print

City of Winnipeg _____

Signature

Print

Hydrostatic Leakage Test - pressure applied to valve body casting

- min test pressure = _____ ; min test duration = _____ minutes

Test Pressure: _____

Test Date: _____

Test Duration: _____

Gauge Number: _____

Witnessed by:

Mftr Representative _____

Signature

Print

UMA Engineering Ltd _____

Signature

Print

City of Winnipeg _____

Signature

Print