



AFFIDAVIT OF MANUFACTURER FOR CAST IRON BOILERS OR PRESSURE VESSELS

**Under the Provisions of the Boilers and Pressure Vessels Ordinance
As approved by the Boiler & Pressure Vessel Committee of the C.S.A.**

Upon Shipment of Boiler or Pressure Vessel this form fully and correctly filled in and attested to must be mailed to the office of the Chief Boiler Inspector in Yukon in accordance with the regulations under the Ordinance governing the construction and installation of boilers and pressure vessels, otherwise the use of same may be prohibited or the working pressure severely penalized.

Manufactured by: _____
(Name and address of the Manufacturer)

Manufactured for: _____
(Name and address of the Purchaser)

Location of installation: _____

A.S.T.M. or A.S.M.E. Material Specification No.: _____

Maker's Series No.: _____ Mfr's Serial No.: _____ C.R.N.: _____

Number of Sections including front and back: _____

Minimum thickness of Castings: _____ Grate Area : _____ sq. feet

Boiler Heating Surface: _____ sq. ft. If steam processor, capacity: _____ cu. ft

Input _____ B.T.U. Output: _____ B.T.U.

EQUIPMENT SUPPLIED

Safety Valve Maker's Name : _____ No. of Valves : _____

Trade Mark or Type No. : _____ Inlet Dia. : _____ Seat Dia. : _____

C.R.N. : _____ Set to relieve at : _____ lbs. Capacity : _____
(lbs. or B.T.U.) per hour

MAKER'S NAME / MAKER'S NAME

SIZE / SIZE

C.R.N. / C.R.N.

Fusible Plug			
Steam Gauge			
Feed Water Regulator			
Fuel Regulator			

A hydrostatic test of _____ pounds per square inch has been applied, and the pressure maintains for thirty minutes, with water temperature at or about 60°F, without developing any leak or rupture. The pressure gauge has been tested by our Company with a standard test gauge and is correct. The safety valve is set to blow at _____ lbs. per square inch, and the rated working pressure of this vessel as per the C.S.A. Regulations, is _____ lbs. per square inch. I hereby declare that the foregoing statement, having reference to vessel serial number _____ completed on the _____ day of _____, 20 ____, is in all respects true, and that said vessel has been built in accordance with specifications as approved under Design Registration Number _____ in accordance with C.S.A. Regulations.

Sworn before me at _____ Signed _____
(town, city) (Shop Foreman)

(Prov., Territory or State of)

this _____ day of _____, 20 ____. For _____
(Name of Company)

(Signature of Commissioner, J.O., or N.P.) (address of Company)

FOR OFFICE USE ONLY

Inspector's No. (A) _____ Location _____

Received _____, 20 ____. Checked _____, 20 __.

*I have allowed a working pressure of _____ lbs. per square inch, and have issued
Certificate No. _____. Vessel owned by _____ of*

Remarks _____

(Signature of Inspector)