

STATIC EQUIPMENT INSPECTION REPORT - Exhibit # 300a
COMPANY: _____

SIGMA JOB #: _____

District: _____ Facility: _____ Lsd _____ Skid: _____

Item Insp.: _____

VESSEL DATA

Equip#: _____ Serial #: _____ ABSA#: _____ CRN #: _____

Manuf: _____ Code/Div.: _____ Para: _____ Code Stamp: _____

 Yr. Built: _____ Size: _____ Actual Est. Insulated: _____

Service: _____ PWHT: _____ R.T.: _____ Repairs: _____

Nominal Thickness & Material

Head: _____ Material: _____ C.A. _____ Reasons: _____

Head: _____

Shell: _____

Shell: _____

Channel HD: _____

Channel SH: _____

Boot HD: _____

Boot SH: _____

 MAWP Shell: Psi kPa Temp: _____ F C

 MAWP Tube: Psi kPa Temp: _____ F C

Comments: _____

 Status: IN SERVICE

 OUT OF SERVICE

 Manway: YES NO

Reason for Inspection
 PLANNED - IN SERVICE

 PROBLEM INVESTIGATION

 PROCESS CHANGE

 COMMISSIONING

PSV INFORMATION

 Location: S _____ S **S = SHELL SIDE**

 Manufacturer: T _____ T **T = TUBE SIDE**

 Serial #: P _____ P **P = PIPING**

PSV #: _____

Inlet Isolation valves sealed open:

 YES NO

Model: _____

Outlet Isolation valves sealed open:

 YES NO

Set Press: _____

Capacity: _____

Status: _____

Inlet Size (mm): _____

Outlet Size (mm): _____

Conn Type (F/T): _____

Serviced By: _____

Last Service Date: _____

X

 Software required, please download
 from <http://www.arx.com>

Inspection Requested By: _____ Inspection Date: _____

Inspection Performed By: _____ Certification #: _____

Chief Inspector: _____ Certification #: _____

EXTERNAL VISUAL INSPECTION

ABSA#:

SIGMA JOB #:

<u>Remedial Action</u>	<u>Access & Coverage</u>	<u>Other</u>	<u>Shell</u>
<input type="checkbox"/> No Action Required <input type="checkbox"/> Paint Repairs <input type="checkbox"/> Repair Weld - S.R. <input type="checkbox"/> Repair Weld - No S.R. <input type="checkbox"/> Grind Out <input checked="" type="checkbox"/> See Comments	<input type="checkbox"/> Poor Cleaning <input type="checkbox"/> Partial Int. Inspection <input checked="" type="checkbox"/> External Inspection <input type="checkbox"/> NDE Inspection <input type="checkbox"/> M <input type="checkbox"/> UT <input type="checkbox"/> R <input type="checkbox"/> BH <input type="checkbox"/> PT <input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> See Comments <input type="checkbox"/> Ground Cable <input checked="" type="checkbox"/> <input type="checkbox"/> N <input type="checkbox"/> Ladders/Handrail/Walkway Damage <input checked="" type="checkbox"/> Nameplate Secure <input type="checkbox"/> N <input checked="" type="checkbox"/> Nameplate Legible <input type="checkbox"/> N <input checked="" type="checkbox"/> See Attached Pictures	<input checked="" type="checkbox"/> TOP <input checked="" type="checkbox"/> BOTTOM
Nozzles	External Protection	Welds	Supports
<input checked="" type="checkbox"/> Good Condition <input type="checkbox"/> Cracked <input type="checkbox"/> Scaled <input type="checkbox"/> Plugged <input type="checkbox"/> Poor Welding <input type="checkbox"/> Leaking <input type="checkbox"/> Seal Face Corrosion <input type="checkbox"/> Bolts Missing/Loose/Damage <input type="checkbox"/> Partial Int. Inspection	<input checked="" type="checkbox"/> Good Condition <input type="checkbox"/> Fireproofing Cracked <input type="checkbox"/> Insulation Damaged <input type="checkbox"/> Paint Deteriorated <input type="checkbox"/> Corrosion Under Insulation (CUI) <input type="checkbox"/> Asbestos <input type="checkbox"/> YES <input type="checkbox"/> <input checked="" type="checkbox"/> NO <input type="checkbox"/> Insulated <input type="checkbox"/> YES <input type="checkbox"/> <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> Good Condition <input type="checkbox"/> Corroded <input type="checkbox"/> Cracked <input type="checkbox"/> Broken <input type="checkbox"/> Poor Quality	<input checked="" type="checkbox"/> Good Condition <input type="checkbox"/> Distorted <input type="checkbox"/> Cracked <input type="checkbox"/> Broken <input type="checkbox"/> Poor Installation <input type="checkbox"/> Bolts Missing/Loose/Damaged <input type="checkbox"/> Support Ring Damaged <input type="checkbox"/> N/A
Heads	Heads	Pressure Gauge	Vessel Repad
<input type="checkbox"/> TOP <input checked="" type="checkbox"/> NORTH <input type="checkbox"/> WEST	<input type="checkbox"/> BTM <input checked="" type="checkbox"/> SOUTH <input type="checkbox"/> EAST	<input type="checkbox"/> Glass Intact <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Within Operating Limits <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Obvious Leaks <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> N/A <input type="checkbox"/> Vent Holes <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> Plugged <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
PIPING - PSV	PIPING - INLET	PIPING - OUTLET/DRAIN	
<input checked="" type="checkbox"/> Good Condition <input type="checkbox"/> External Corrosion <input type="checkbox"/> Pitted <input checked="" type="checkbox"/> Supported <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Threaded Fittings <input type="checkbox"/> Deadlegs	<input checked="" type="checkbox"/> Good Condition <input type="checkbox"/> External Corrosion <input type="checkbox"/> Pitted <input checked="" type="checkbox"/> Supported <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Threaded Fittings <input type="checkbox"/> Deadlegs	<input checked="" type="checkbox"/> Good Condition <input type="checkbox"/> External Corrosion <input type="checkbox"/> Pitted <input checked="" type="checkbox"/> Supported <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Threaded Fittings <input type="checkbox"/> Deadlegs	

EXTERNAL VISUAL INSPECTION

ABSA #: _____ SIGMA JOB#: _____

OBSERVATIONS:

- Vessel is in Good Condition
- API 510 External Inspection confirmed the equipment is fit for continued service
- NOT FIT FOR SERVICE, DETAILS BELOW

RECOMMENDATIONS:

PICTURES: