A. PRESSURE VESSEL COMPLIANCE CHECKLIST

1. This checklist shall be used for reviewing compliance with the Indiana, National and FM Global Pressure vessel standards.
2. The purpose of this checklist is to ensure that all pressure vessel equipment is appropriately inspected, maintained and registered.

B. Operational Area:

C. Completed by: ____________________________ Date: ____________________________

D. Types of Pressure Vessels within the Department:

1. ____________________________ Room Number: ____________
2. ____________________________ Room Number: ____________
3. ____________________________ Room Number: ____________
4. ____________________________ Room Number: ____________

If the answer to any of the following questions is “NO” please contact Facilities Design and Operations (FDO).

F. Applicable Standards:

1. Have all pressure vessels used within the department been affixed with the boiler ID plate and certification YES___ NO___
2. Have all pressure vessels been added to the pressure vessel data system maintained by FDO YES___ NO___
3. Have all pressure vessels that require registration been registered prior to use YES___ NO___
4. Have all alterations to the design of individual pressure vessels been approved by FDO YES___ NO___
5. Has FDO been notified of pressure vessels that have been removed from service YES___ NO___
6. Are pressure vessel records current (registrations, inspection schedules, maintenance) YES___ NO___

G. Additional Comments:

*Upon Completion Please forward to FDO Maintenance

Pressure Vessels Owner: RMS/Director
Approval Date: July, 2018 Review Date: July, 2019
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