



VALVE TAG NO. _____

VALVE EXAMINATION REPORT

JOB: _____

DATE: _____

VALVE TYPE: _____

P. O. # _____ ITEM _____

VALVE SIZE: _____

SPECIFICATION: _____

HEAT NUMBER: _____

MATERIAL TEST
REPORT: _____

CONNECTION: B.W. _____

T.C. _____ FLG _____

BODY MATERIAL: _____

RATED @: _____

SEAT MATERIAL : _____

TYPE OF PORT: _____

SEAL MATERIAL: _____

TEMP RANGE: _____

RESULTS: ACCEPTED _____

REJECTED _____ HOLD _____

COMMENTS:

EXAMINER