



**GAS CYLINDER CABINET  
CERTIFICATION REPORT  
(FOR SILANE CABINETS ONLY)**



1601 Las Plumas Avenue

San Jose, CA 95133

(408) 347-3400

PROJECT:

SYSTEM:

|                  |                              |                 |
|------------------|------------------------------|-----------------|
| Location:        | Design CFM:                  | Tested CFM (1): |
| Cabinet No.      | Design FPM (2) 200           | Final FPM:      |
| Contents: Silane | Installed Indicator Reading: |                 |

**TEST REQUIRED:** Exhausted Volume = Required Cabinet Velocity X Footprint Area

PASS:

☐

Tested Exhaust Volume (1) \_\_\_\_\_ CFM

FAIL:

☐

LABELED:

☐

**Cabinet Footprint:**

Width: \_\_\_\_\_ Inches

Depth: \_\_\_\_\_ Inches

Area: \_\_\_\_\_ Sq. Ft.

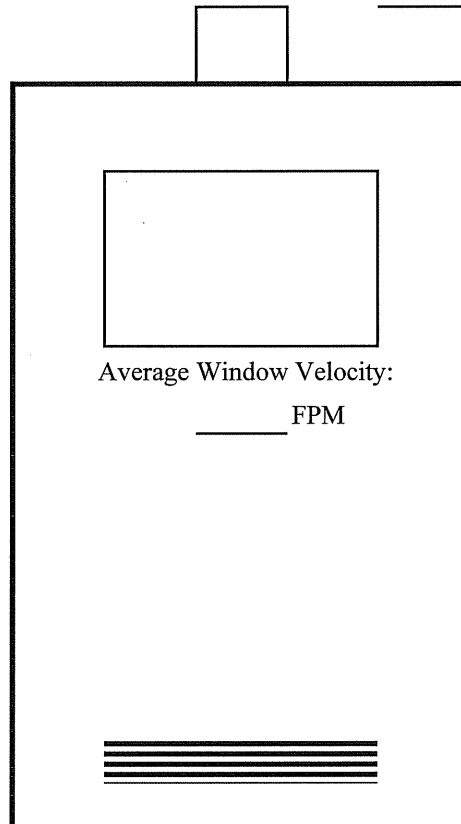
X Required: 200 FPM

= Required: \_\_\_\_\_ CFM

**Instruments Used:**

\_\_\_\_\_  
Date Calibrated: \_\_\_\_\_

\_\_\_\_\_  
Date Calibrated: \_\_\_\_\_



Notes: (1) Final exhausted volume with cabinet in normal operating mode, door(s) and service window(s) closed.  
(2) Cabinet velocity required per local city Hazmat requirements and codes.

Remarks: On banks of four or more cabinets the door of an alternate cabinet shall be open during testing to simulate the effect of a cylinder change.

Filename: BOTTLE6.XLS 8/97

Test Date:

Readings by:

FN 8.010.2 REV 2

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