

Inspection Record for Piping Release for Flushing and Pressure Testing

Record No.: _____

Client: _____	Subcontractor: _____
Project No.: _____	Subcontract P.O. No.: _____
Project Name: _____	Test system No.: _____

Reference Document: (Attach relevant P&ID and isometric drawings to define test system)

Items to inspect	Subcontractor	Company		Remarks
	inspected initials/date	Hold Point	inspected* initials/date	
1.0 Isometric prefabrication dossier accepted				
2.0 Site welding and erection complete, inspected, tested (repaired)				
3.0 Punchlist requested				
4.0 Punchlist issued				
5.0 Punchlist items complete				
6.0 Ready for flushing and testing i.e. blind flanges, vents, drains, jumpers, pup pieces, pressure gauges etc. in place as per drawing				

H - Company's presence is mandatory for all activities in section. Attachments, No. of pages: _____
 h - Company's presence is mandatory.

Accepted for Subcontractor	Accepted for Company	Accepted for Client
Name: _____	Name: _____	Name: _____
Signature: _____	Signature: _____	Signature: _____
Date: _____	Date: _____	Date: _____

*Company only initials for holdpoint