



Labour and Advanced Education

103 Garland Ave., 3rd Floor
Dartmouth, Nova Scotia
B3B 0K5

**Installation Report For
Cast Iron and Cast Aluminum Sectional Boilers**

Manufacturer: _____

Boiler Model No: _____

Serial No: _____

CRN: _____

Provincial Identification No. (if any): _____

Located at: _____

This is to certify that the above-mentioned completed unit has been subjected to a hydrostatic test of _____ kPa / Psi as per the requirements of the ASME Code Section IV, and that this test was satisfactory, with no apparent defects observed.

Company Name: _____

Representative Signature: _____ Date: _____

Inspector Signature: _____ NS# _____ Date: _____