

## Pressure Vessel Pressure Test Inspection Report

### Equipment Basic Information

Item	Content
Vessel Name/ID	
Design Pressure	0.075MPa
Test Pressure	0.1 MPa
Test Medium	<input type="checkbox"/> Hydrostatic Test <input type="checkbox"/> Pneumatic Test
Test Date	2025-04-11
Test Location	Xiaowu Shuikou Village, Shatian Town, Huiyang District, Huizhou City
Operator	Ling Tan
Supervisor	Lin Lee

### I. Pre-Test Preparation Checklist

Check Item	Compliance Criteria	Compliance (Yes/No)	Remarks/Issues
1. Technical Documentation Review	Valid drawings, material certificates, welding records	<input type="checkbox"/>	
2. Vessel Visual Inspection	No visible damage, defects in welds	<input type="checkbox"/>	
3. Pressure Gauge Calibration	Range & accuracy verified ( $\geq 1.6$ class)	<input type="checkbox"/>	
4. Safety Valve/Relief Device	Functional verification	<input type="checkbox"/>	
5. Safety Measures	Barricaded area, PPE, emergency plan	<input type="checkbox"/>	

### II. Test Procedure Records

#### A. Hydrostatic Test

Step	Requirement	Record/Data	Operator Signature
1. Filling & Venting	Complete air removal	<input type="checkbox"/> Done <input type="checkbox"/> Not Done	
2. Pressurization	Phased to test pressure (1.25-1.5×DP)	Time: 5 minute	

Step	Requirement	Record/Data	Operator Signature
	Pressure: 0.10MPa		
3. Holding ( $\geq 30$ min)	No leakage/deformation	Duration: 45 minute	
4. Depressurize to DP	Re-check sealing	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	

### B. Pneumatic Test

Step	Requirement	Record/Data	Operator Signature
1. Pressurization	Phased to test pressure (1.1-1.25 $\times$ DP)	Pressure: MPa	
2. Leak Check ( $\geq 10$ min)	Soap solution/gas detector	Leak Points:	
3. Depressurize	Slow venting	<input type="checkbox"/> Done <input type="checkbox"/> Not Done	

## III. Post-Test Actions

Item	Status	Remarks
1. Drain/Gas Release	<input type="checkbox"/> Done <input type="checkbox"/> Pending	Drying Method:
2. Photo Documentation	<input type="checkbox"/> Welds <input type="checkbox"/> Flanges <input type="checkbox"/> Others	Photo ID:
3. Report Generation	<input type="checkbox"/> Complete <input type="checkbox"/> Pending	Report No.:

## IV. Safety Compliance Verification

Check Item	Status (Yes/No)	Non-Conformities
1. Pressure Limit Adhered	<input type="checkbox"/>	
2. Operator Certification	<input type="checkbox"/>	
3. Ambient Temperature Control (5°C–50°C)	<input type="checkbox"/>	
4. Emergency Plan Readiness	<input type="checkbox"/>	

## V. Test Conclusion

Item	Result
Test Result	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Item	Result
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Pending Issues/Actions	
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## VI. Review & Approval

Reviewer	Role	Signature/Date
Test Supervisor	Responsible Engineer	
Quality Department	QA/QC Personnel	

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## Notes

- 1.This report must be archived with test records and photos.
  - 2.Non-conformities must be documented in the "Remarks" section and resolved per corrective action procedures.
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