


UNIFORM STATUTORY DECLARATION FORM FOR THE REGISTRATION OF FITTING DESIGNS

New Brunswick
Nunavut

Nova Scotia
Yukon

Prince Edward Island
Northwest Territories

Newfoundland and Labrador

Manufacturers Name: Willy Instrumentos De Medição E Controle Ltda.	
Manufacturers Address: Rua João Pessoa, 620-Santa Paula-09520-000-São Caetano do Sul / SP- Brazil	
Plant Locations: Rua João Pessoa, 620-Santa Paula-09520-000-São Caetano do Sul / SP- Brazil	
<p align="center">Category of Fittings to be registered. Circle one Category only</p> <p>A Pipe fittings, including couplings, tees, elbows, Ys, plugs, unions, pipe caps, or reducers B Flanges: all flanges C Valves: all line valves D Expansion joints, flexible connections, and hose assemblies: all types E Strainers, filters, separators, and steam traps <input checked="" type="radio"/> F Measuring devices, including pressure gauges, level gauges, sight glasses, levels, or pressure transmitters G Certified capacity-rated pressure relief devices acceptable as primary over pressure protection on boilers, pressure vessels, piping and fusible plugs H Pressure retaining components that do not fall into one of the above categories N Nuclear components: Class 1 <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 <input type="checkbox"/> , (Meeting CNSC or ASME requirements)</p>	<p align="center">Title of the Standard of Construction</p> <p>ASME B31.3 - 2018 2020 (DG)</p>
<p>Show Manufacturers Name, Trademark, or Logo as it will appear on the product</p> 	<p align="center">Type of Construction</p> <p>Forged <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Wrought <input checked="" type="checkbox"/> Cast <input type="checkbox"/> Other <input checked="" type="checkbox"/> Describe other: machined</p>
<p>List of supporting documentation and identification of the actual items to be registered:</p> <p>SOR-MS-REV0; Fitting drawings; ISO 9001:2015; PRP01-AC-MS-REV0</p>	

Declaration:

I Sergio Capassi (see note 3) employed by Willy Instrumentos and being the person having full authority and responsibility for the quality of the end product do solemnly declare that the information contained in this form is true to the best of my knowledge represents the product for which registration is sought. The dimensions, materials of construction, pressure temperature ratings, and identification markings are in accordance with the herein named standards. I further declare that the manufacture of these fittings is regulated by a Quality Control Program which extends to each plant where fabrication occurs in whole or in part and has been verified by Bureau Veritas as being suitable for that purpose and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

Signature of Declarer: _____

Declared before me at _____

This _____ day of _____ AD _____

Commissioner of Oaths

Or Notary Public: (sign) _____

(Affix Official seal to the right)

Use this space for the Official Seal

<p align="center">This space for Regulatory Authority use.</p> <p align="center">This registration must be revalidated after ten (10) years from the date of acceptance.</p> <p>CRN: <u>0F1365.9</u></p> <p>FID#: <u>2433</u></p> <p>2198 MicroTube™ Siphon. 5000psig; -20F to 800F. Notes: A479 316L, B564 N04400. 1/2 NPT Male, 1/2 NPT Male</p> <ol style="list-style-type: none"> All Fittings shall be registered in the name of the Manufacturer. Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation. The Declaration shall be made by the person having full authority and responsibility for the quality of the end product. Quality Control programs shall be resubmitted for validation. <p>G 1/2 B Male, G 1/2 B Male - DG</p> <p>11/2018</p>	<p align="center">Newfoundland Labrador Service NL</p> <p>Registered <u>0F1365.90</u></p> <p>Date <u>21/06/18</u></p> <p>Engineering and Inspection Services</p> <p>Registered by <u>[Signature]</u></p> <p align="center">UNDER THE AUTHORITY OF THE PUBLIC SAFETY ACT AND THE BOILER, PRESSURE VESSEL, AND COMPRESSED GAS REGULATIONS</p>
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Manufacturers Name: Ashcroft, Inc.	
Manufacturers Address: 250 East Main Street, Stratford, CT 06614-5145, USA	
Plant Locations: 250 East Main Street, Stratford, CT 06614-5145, USA	
<p align="center">Category of Fittings to be registered. Circle one Category only</p> <p>A Pipe fittings, including couplings, tees, elbows, Ys, plugs, unions, pipe caps, or reducers</p> <p>B Flanges; all flanges</p> <p>C Valves; all line valves</p> <p>D Expansion joints, flexible connections, and hose assemblies: all types</p> <p>E Strainers, filters, separators, and steam traps</p> <p>F Measuring devices, including pressure gauges, level gauges, sight glasses, levels, or pressure transmitters</p> <p>G Certified capacity-rated pressure relief devices acceptable as primary over pressure protection on boilers, pressure vessels, piping and fusible plugs</p> <p>H Pressure retaining components that do not fall into one of the above categories</p> <p>N Nuclear components: Class 1 <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 <input type="checkbox"/> (Meeting CNSC or ASME requirements)</p>	<p align="center">Title of the Standard of Construction</p> <p>ASME B31.3 - 20162020 (DG)</p>
<p>Show Manufacturers Name, Trademark, or Logo as it will appear on the product</p> <div align="center">  </div>	
<p>Type of Construction</p> <p>Forged <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Wrought <input checked="" type="checkbox"/></p> <p>Cast <input type="checkbox"/> Other <input checked="" type="checkbox"/></p> <p>Describe other: machined</p>	
<p>List of supporting documentation and identification of the actual items to be registered:</p> <p>SOR-MS-REV0; Fitting drawings; ISO 9001:2015; PRP01-AC-MS-REV0</p>	

Declaration:

I, Jeremy Payne (see note 3) employed by Ashcroft, Inc. and being the person having full authority and responsibility for the quality of the end product do solemnly declare that the information contained in this form is true to the best of my knowledge represents the product for which registration is sought. The dimensions, materials of construction, pressure temperature ratings, and identification markings are in accordance with the herein named standards. I further declare that the manufacture of these fittings is regulated by a Quality Control Program which extends to each plant where fabrication occurs in whole or in part and has been verified by Lloyd's Registry as being suitable for that purpose and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

Signature of Declarer: _____

Declared before me at _____

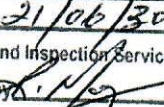
This _____ day of _____ AD _____

Commissioner of Oaths

Or Notary Public: (sign) _____

(Affix Official seal to the right)

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<p align="center">This space for Regulatory Authority use.</p> <p align="center">This registration must be revalidated after ten (10) years from the date of acceptance.</p>	
<p>CRN: <u>OF1365.9</u></p> <p>FID#: <u>2433</u></p> <p>2198 MicroTube™ Siphon. 5000psig; -20F to 800F.</p> <p>Notes: A479 316L, B564 N04400. ¼ NPT Male, ½ NPT Male</p> <ol style="list-style-type: none"> All Fittings shall be registered in the name of the Manufacturer. Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation. The Declaration shall be made by the person having full authority and responsibility for the quality of the end product. Quality Control programs shall be resubmitted for validation. <p>G ¼ B Male, G ½ B Male - DG</p> <p>11/2016</p>	<p align="center">Newfoundland Labrador Service NL</p> <p>Registered <u>OF1365.90</u></p> <p>Date <u>21/06/30</u></p> <p>Engineering and Inspection Services</p> <p>Registered by: </p> <p align="center">UNDER THE AUTHORITY OF THE PUBLIC SAFETY ACT AND THE BOILER, PRESSURE VESSEL AND COMPRESSED GAS REGULATIONS</p> <p align="center"><small>Reg 1.0 - Fittings Rev. 2</small></p>