

Statutory Declaration (Registration of Fittings)

TSK-1008

I. Declaration Information

I, _____, Add manufacturer's logo or trademark as it will appear on the fitting

 (company title, e.g. vice president, plant manager, chief engineer)
 (must be in a position of authority in the manufacturing plant where the fitting is produced)

of: _____
 (name of manufacturer)

located at: _____
 (Plant Address – Apt/Street) (City,Prov) (Postal Code)

do solemnly declare that the fittings listed hereinunder, which are subject to the **Saskatchewan Boiler and Pressure Vessel Act** (check one)

- Comply with the requirements of _____ which specifies the dimensions,
 (title of recognized North American Standard)
 Materials of construction, pressure / temperature ratings and identification marking of the fittings, or
- Are not covered by the provisions of a recognized North American standard and are therefore manufactured to comply with _____ as supported by the attached data which identifies the dimensions, materials of construction, pressure / temperature ratings and the basis for such ratings, and the marking of the fittings for identification.

I further declare that the manufacturer of these fittings is controlled by a quality control program which has been verified by the following authority, _____ as being suitable for the manufacturer of these fittings to the stated standard. The fittings covered by this declaration, for which I seek registration, are _____

In support of this application, the following information, calculations and / or test data are attached:

II. Declaration

DECLARED before me at _____ In the _____ of _____
 this _____ day of _____, _____
 _____ (print name) _____ (Signature)
 _____ (Signature of Commissioner of Oaths)

III. Office Use Only

To the best of my knowledge and belief, the application meets the requirements of the **Boiler and Pressure Vessel Act** and CSA B51, Clause 4.2, and is accepted for registration in Category _____
 _____ (Registration Number) _____ (Date Registered – MM DD YYYY) _____ (Expiry Date – MM DD YYYY)
 (For the Chief Inspector)