

FORM U-1A MANUFACTURER'S DATA REPORT FOR PRESSURE VESSELS
(Alternative Form for Single-Chamber, Completely Shop- or Field-Fabricated Vessels Only)
As Required by the Provisions of the ASME Boiler and Pressure Vessel Code Rules, Section VIII, Division 1

1. Manufactured and certified by _____
(Name and address of Manufacturer)
2. Manufactured for _____
(Name and address of Purchaser)
3. Location of installation _____
(Name and address)
4. Type _____
(Horizontal or vertical, tank) (Manufacturer's serial number) (CRN) (Drawing number) (National Board number) (Year built)
5. ASME Code, Section VIII, Division 1 _____
[Edition and Addenda, if applicable (date)] (Code Case numbers) (Special service per UG-120(d))
6. Shell _____
(Material spec. number, grade) (Nominal thickness) (Corr. allow.) (Inner diameter) (Length (overall))

Body Flanges on Shells												
No.	Type	ID	OD	Flange Thk	Min Hub Thk	Material	How Attached	Location	Bolting			
									Num & Size	Bolting Material	Washer (OD, ID, Thk)	Washer Material

7. Seams _____
[Long. (welded, dbl., snl., lap, butt)] [R.T. (spot or full)] (Eff., %) (H.T. temp.) (Time, hr) [Girth (welded, dbl., snl., lap, butt)] [R.T. (spot or full)] (Eff., %) (No. of courses)
8. Heads: (a) _____ (b) _____
(Material spec. number, grade or type) (H.T. — time and temp.) (Material spec. number, grade or type) (H.T. — time and temp.)

	Location (Top, Bottom, Ends)	Thickness		Radius		Elliptical Ratio	Conical Apex Angle	Hemispherical Radius	Flat Diameter	Side to Pressure		Category A		
		Min.	Corr.	Crown	Knuckle					Convex	Concave	Type	Full, Spot, None	Eff.
(a)														
(b)														

Body Flanges on Heads												
	Location	Type	ID	OD	Flange Thk	Min Hub Thk	Material	How Attached	Bolting			
									Num & Size	Bolting Material	Washer (OD, ID, Thk)	Washer Material
(a)												
(b)												

9. MAWP _____ at max. temp. _____
(Internal) (External) (Internal) (External)
- Min. design metal temp. _____ at _____ . Hydro., pneu., or comb. test pressure _____ .
- Proof test _____ .

10. Nozzles, inspection, and safety valve openings:

Purpose (Inlet, Outlet, Drain, etc.)	No.	Diameter or Size	Type	Material		Nozzle Thickness		Reinforcement Material	Attachment Details		Location (Insp. Open.)
				Nozzle	Flange	Nom.	Corr.		Nozzle	Flange	

11. Supports: Skirt _____ Lugs _____ Legs _____ Other _____ Attached _____
(Yes or no) (Number) (Number) (Describe) (Where and how)

12. Remarks: Manufacturer's Partial Data Reports properly identified and signed by Commissioned Inspectors have been furnished for the following items of the report: _____
(Name of part, item number, Manufacturer's name and identifying stamp)

Manufactured by _____

Manufacturer's Serial No. _____ CRN _____ National Board No. _____

CERTIFICATE OF SHOP/FIELD COMPLIANCE

We certify that the statements made in this report are correct and that all details of design, material, construction, and workmanship of this vessel conform to the ASME BOILER AND PRESSURE VESSEL CODE, Section VIII, Division 1. "U" Certificate of Authorization number _____ expires _____ .

Date _____ Co. name _____ (Manufacturer) Signed _____ (Representative)

CERTIFICATE OF SHOP/FIELD INSPECTION

Vessel constructed by _____ at _____ .

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and employed by _____ of _____

have inspected the component described in this Manufacturer's Data Report on _____, and state that, to the best of my knowledge and belief, the Manufacturer has constructed this pressure vessel in accordance with ASME BOILER AND PRESSURE VESSEL CODE, Section VIII, Division 1. By signing this certificate neither the Inspector nor the Inspector's employer makes any warranty, expressed or implied, concerning the pressure vessel described in this Manufacturer's Data Report. Furthermore, neither the Inspector nor the Inspector's employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date _____ Signed _____ (Authorized Inspector) Commissions _____ (National Board Authorized Inspector Commission number)