

# UPP Duct - Tightness Test Report

DUCT TEST REPORT	
Site Name:	
Duct Carrying Type of Line:	<input type="checkbox"/> Fill <input type="checkbox"/> Vent <input type="checkbox"/> Syphon <input type="checkbox"/> VR 1b <input type="checkbox"/> VR 2 <input type="checkbox"/> Loose Cabling <input type="checkbox"/> Suction <input type="checkbox"/> Pressure   From: _____ To: _____

Conformance Control and Visual Inspection		
Number of welded joints in pipe line:		Notes:
Welding times marked on all joints?		Notes:
Scraping marks?		Notes:
Joints square?		Notes:
Welding pins extended?		Notes:
Pipe routing/separations correct?		Notes:
Minimum fall correct?	%	Notes:

Tightness Testing of Duct Lines			
PRESSURE TEST			
Test pressure	500 millibar		
Test Medium	<input type="checkbox"/> Air <input type="checkbox"/> Inert Gas (Nitrogen)		
Test time (at least 90 minutes)	Start Time: _____ Start temperature: _____ °C	End Time: _____ End Temperature: _____ °C	<input type="checkbox"/> PASS <input type="checkbox"/> FAIL
Pressure drop	m bar over test period		

Certification Sign Off	
<p>The above described pipe run has been checked for correct installation visually and by means of a pressure test. It has been found to be installed in accordance with UPP Systems installation guidelines and has been certified by:</p> <hr/> <p>The information given above is true and correct.</p>	
Signed by: _____	Date: _____ (day/month/year)

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