DESIGN, CONSTRUCTION AND INSPECTION OF COMPRESSED NATURAL GAS AND HYDROGEN REFUELLING STATION REPORT

NOTE: This report shall be completed by the person responsible for the installation of the refuelling station (page 1 and 2), in **DUPLICATE** and submitted to the ABSA Safety Codes Officer for the purpose of verifying and documenting compliance with the Pressure Equipment Safety Regulation. One copy signed by the Safety Codes Officer shall be returned to submitter upon completion and acceptance of the installation.

1. Ultimate Owner _____
(Name and Address)

2. Location of Plant _____
(Sec, TWP, Rge)

3. Plant previously registered under PP - _____

4. Type of Refuelling Station (choose one) Compressed Natural Gas ☐ Hydrogen ☐ or Both ☐

5. Prime Contractor _____ Ref. or Job No. _____
_____
(Company Name and Address)

Select one of the following:
- ☐ *If* Piping has been registered ***skip Section(s) 6 to 9,*** *(mandatory design registration for piping systems > 500 liters)*,
- ☐ *If* Piping aggregate internal volume is NOT exceeding 500 liters and has NOT been previously registered with ABSA, ***complete Section(s) 6 to 9 by Professional Engineer.***

6a. Engineered by _____ Ref. or Job No. _____
_____
(Company Name and Address)

6b. Permit to Practice Number _____

7. Pressure Piping to comply with the Code: B31.1 ☐ B31.3 ☐ _____
(Edition/Addenda)

8. List of documents with revision numbers (If additional space is required, use supplemental sheets) P&IDs, PSV and Line Lists, Specifications for pipe, valves and all fittings included in the scope of this piping design registration. If documents are listed on supplemental sheet, record the supplemental sheet numbers in this space.

_____
_____
_____

P. Eng Stamp

9. **Name and authenticated stamp/seal of Professional Engineer**

By applying my stamp/seal and signature to this document, I, (print name) _____, accept responsibility for the piping design in accordance with (Code/Edition/Addenda)_____, CSA B51 Part 3, the Safety Codes Act and Regulations.

FOR ABSA USE ONLY:

Report received by ABSA SCO _____ Date : _____

10a. Are all fittings suitable for the specific design service conditions? ☐ **Yes**

10b. Are all fittings (except for hose assemblies) registered with ABSA? ☐ **Yes** ☐ **Pending**

10c. Are all hose assemblies manufactured to RMA IP-2 or registered with ABSA? ☐ **Yes**

11. Have all piping butt welds been examined radiographically? ☐ **Yes** *(CSA B51, Part 3 - 5.4)*

12. Has a Certificate of Inspection Permit been issued for all pressure vessels? ☐ **Yes** *(PESR, 33)*

13. Have all the required inspections been conducted and documented? ☐ **Yes** *(CSA B51, Part 3 - 4.4)*

14. Has overpressure Protection been provided? ☐ **Yes** *(CSA B51, Part 3 - 5.6)*
    - A safety valve shall be installed on the compressor outlet and set to open at or below the design pressure of the downstream system. *(CSA B51, Part 3 - 5.6.1)*
    - Where ground storage vessels can be isolated from the safety valve previously mentioned, a separate safety valve is required by the vessel code of construction. *(CSA B51, Part 3 - 5.6.2)*

15. Pressure testing has been witnessed by ABSA Safety Codes Officer? ☐ **Yes**
    Pressure Test shall be *(CSA B51, Part 3 - 5.5)*:
    - not less than 1.5 times system design pressure for hydrostatic testing
    - not less than 1.2 times system design pressure for pneumatic testing *(see AB-522, AB-532 for req's)*
    - held for 30 minutes or longer if necessary to inspect for leakage
    - held for 24 hours and a recording chart shall be used if part of the system has been buried or is otherwise inaccessible for inspection

16. Piping Construction forms (AB-83 and AB-83F) shall be reviewed with ABSA SCO and duly certified? ☐ **Yes**

17. Permit has been obtained from the local gas authority? ☐ **Yes** Permit # _____
    Note: For information on obtaining a gas permit go to http://www.municipalaffairs.alberta.ca/permits

18. General Remarks _____

19. **Certificate of Compliance**
    We certify that the statements made in this Report are correct and that all design, material, construction and workmanship on this refuelling station conform to the requirements of the Alberta Safety Codes Act and CSA B51 Part 3.

(Company Name)	(AQP Number & Expiry Date)
(Print Name)	(Signature & Date)

20. **Certificate of Inspection**
    I have inspected the refuelling station described in this report. To the best of my knowledge, this work has been completed in accordance with the requirements of the Alberta Safety Codes Act and CSA B51 Part 3.

ABSA SCO (print name)	Signature & DP Number	Date