



the pressure equipment safety authority

GENERAL ENGINEERING REQUIREMENTS FOR DESIGN & CONSTRUCTION OF PRESSURE PIPING SYSTEMS

AB-96 Page 1 of 2 2013-03

NOTE: This form shall be completed (page 1 and 2) in DUPLICATE and submitted with specifications and prints of designs in accordance with Section 16 (1) of the Pressure Equipment Safety Regulation.

1. Ultimate Owner \_\_\_\_\_

(Name and Address)

2. Type of Plant \_\_\_\_\_

3. Location of Plant \_\_\_\_\_

(Sec., TWP., Rge.)

4. Plant previously registered under PP - \_\_\_\_\_

5. Construction: Tentative start and completion dates:

Commencement

\_\_\_\_\_  
(month)

\_\_\_\_\_  
(year)

Completion

\_\_\_\_\_  
(month)

\_\_\_\_\_  
(year)

6(a) Engineered by \_\_\_\_\_ Ref. or Job No. \_\_\_\_\_

(Company Name and Address)

6(b) Permit to Practice Number \_\_\_\_\_

7. Prime Contractor \_\_\_\_\_ Ref. or Job No. \_\_\_\_\_

(Company Name and Address)

8. Pressure Piping to comply with the Code: B31.1  B31.3  B31.5  B31.9  Z662  \_\_\_\_\_  
(Edition/Addenda)

9. List of documents with revision #'s (If additional space if required, use supplemental sheets) P&IDs, PSV and Line Lists, Specifications for pipe, valves & 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.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Name and authenticated stamp/seal of Professional Engineer

By applying my stamp/seal and signature to this document,

I, \_\_\_\_\_, accept responsibility  
(print name)

for the piping design in accordance with \_\_\_\_\_ and  
(Code/Edition/Addenda)

the Safety Codes Act and Regulations.

P. Eng Stamp

FOR ABSA USE ONLY:

Reference Tracking No. \_\_\_\_\_



11. Are all fittings suitable for the specific design service conditions? (Yes) \_\_\_\_\_

Are all fittings registered with ABSA? (Yes) \_\_\_\_\_ (Pending) \_\_\_\_\_

12. Select the system overpressure protection type, as required in the PESR Section 38 and as defined in AB-525, and provide the corresponding document number(s) which lists equipment protected by this type.

Type	Document #	REV	Type	Document #	REV
PRV <input type="checkbox"/>			V-OPPSD <input type="checkbox"/>		
RDD or PD <input type="checkbox"/>			P-OMOPP <input type="checkbox"/>		
P-OPPSD <input type="checkbox"/>			V-OMOPP <input type="checkbox"/>		

13. Nondestructive Examination. Please specify type and extent of examination, for example, 100% or random radiography, magnetic particle, ultrasonic, etc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Pressure Piping Test Procedure for other than Hydro test SUBMITTED (Yes) \_\_\_\_\_ (Pending) \_\_\_\_\_

15. Contractor's Quality Control Program Registration No. \_\_\_\_\_

16. General Remarks \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Submitted by

\_\_\_\_\_, \_\_\_\_\_  
(Signature) (Date)

\_\_\_\_\_, \_\_\_\_\_  
(Name) (Company Name)

FOR ABSA USE ONLY:

Registration Number \_\_\_\_\_ Date \_\_\_\_\_

Reference Tracking No. \_\_\_\_\_ S.C.O's Signature \_\_\_\_\_



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# GENERAL ENGINEERING REQUIREMENTS FOR DESIGN & CONSTRUCTION OF PRESSURE PIPING SYSTEMS

AB-96 Supplementary Sheet 1 2013-03

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**FOR ABSA USE ONLY:**

Reference Tracking No. \_\_\_\_\_