

BOILER AND PRESSURE VESSEL STATUS REPORT

Note: This form may be used to provide notification of changes in ownership, location, operating status or scrapping of boilers and pressure vessels.

Please review the responsibilities of the vendor and the new owner under Section 36 of the Pressure Equipment Safety Regulation.

Complete a minimum of two fields (vessel):

Re: Vessel (A)

1) _____ 2) _____ 3) _____

Serial No. _____

CRN _____

Vessel(s) **sold or purchased**. Please transfer the registration of the vessel(s) to:
 Name of New Owner: _____
 Mailing Address: _____
 New Location of Vessel: _____
 (Street Address or LSD)
 Contact Person: _____ Tel: _____
 E-Mail: _____
 Date of Sale: _____ PO No.: _____

Vessel(s) **removed from service** on: _____
(The owner is responsible for ensuring the vessel is inspected by ABSA prior to it being returned to service in the Province of Alberta.)

The above vessel(s) **returned to service** on: _____
 Inspected on: _____ (Date) Inspection Report attached

Vessel(s) **relocated to**: _____
 (Street Address or LSD)

We **own** but do not know the location of this vessel. *(ABSA records will record the location as unknown, and the applicable annual fee(s) will remain in force to your account. Responsibility for safe operation in Alberta continues to reside with your company. When the location becomes known, you are required to notify ABSA.)*

We **sold this vessel(s) but do not know to whom**. *(ABSA records will retain your company name as the owner. Responsibility for safe operation in Alberta also remains with your company until new ownership details are received by ABSA.)*

Vessel(s) **operating outside of the Province of Alberta** since _____ at _____
 Date (yyyy-mm-dd) Location

Please remove from annual registration. You are required to notify ABSA if the vessel returns to service in Alberta.

Vessel Scrapped – All three conditions below must be satisfied

- Vessel has been removed from service and there is no intention to return it to pressure service.
- The nameplate has been removed and all other identification has been removed.
- The vessel is in a condition that it cannot be pressurized. i.e. A hole has been cut in the vessel, or a nozzle has been removed, or a head has been cut off.

Company Name: _____

Position Title: _____ Tel: _____

(Please print name): _____ E-mail: _____

Signature: _____ Date: _____

Please Return This Report To:

Public Works and Government Services Canada
 TELUS Plaza North 5th Flr, 10025 Jasper Avenue
 Edmonton, Alberta T5J 1S6
Attention: Maintenance Management
 (780) 497-3702 Fax (780) 497-3842

AND ABSA
 9410 – 20th Avenue, Edm, AB T6N 0A4
 (780) 437-9100 Fax (780) 437-7787