

Piping System Hydrostatic Test Checklist

NASA Glenn Research Center

WELD REQUEST NUMBER: _____
(N/A for non PSO Related)

<u>DESCRIPTION</u>	<u>INITIAL</u>	<u>DATE</u>
1. SYSTEM INDEX NUMBER: _____	_____	_____
2. LINE IDENTIFICATION: _____	_____	_____
3. HYDROSTATIC TEST PRESSURE, PSIG: _____	_____	_____
4. DESIGN PRESSURE, PSIG: _____	_____	_____
5. HYDROSTATIC TEST FLUID: _____	_____	_____
6. TEST FLUID TEMPERATURE, °F: _____	_____	_____
7. SYSTEM METAL TEMPERATURE, °F: _____	_____	_____
8. VERIFIED CALIBRATED GAUGES: _____	_____	_____
9. HYDROSTATIC TEST RIG VERIFIED: _____	_____	_____
10. HYDROTEST START DATE/TIME: _____	_____	_____
11. HYDROTEST COMPLETION DATE/TIME: _____	_____	_____
12. VISUAL EXAM AT OPERATING PRESSURE: _____	_____	_____
13. HYDROSTATIC TEST PERFORMED BY: _____	_____	_____

ORGANIZATION: _____

REMARKS:

INSPECTOR	_____	_____
	SIGNATURE	DATE
WITNESS	_____	_____
	SIGNATURE	DATE