



VISUAL CYLINDER INSPECTION EVALUATION FORM FOR SCUBA and SCBA



Cylinder Owner's Name _____ Date _____

Address _____ City _____

Province _____ Postal code _____ Phone No. _____

Cylinder Volume/Time _____ Mfg _____ SCBA _____ Other _____

Serial Number _____ First HYDRO Date _____ Current HYDRO _____

Color _____ Working Pressure _____ Material :Steel aluminum FRP Carbon Composite

Code No. of 6351T6 alloy from 1988 and older = SP6498 E6498 E7042 E7446 E7477 E8364 CTC SP922 3AL
Any cylinder manufactured before 1989 must have an eddy current examination at the time of hydrostatic requalification to check for any trace of cracking due to the sustained load and this since January 2017, in addition it must be stamped with the letters VE following the Requalification stamp (CAN / CSA B339-18) Except for CATALINA cylinders (good alloy) We recommend condemning cylinder with these codes: SP6688 and SP6576.

Acceptable Valve K DIN Scott MSA Interspiro Drager Other _____ None Non acceptable Sleeve Y N

EXTERNAL

Evidence of heat damage: Y N (Re-painting): Y N Odor: Y N Bow: Y N

Evidence of Bulges: Y N If required, hammer tone test (steel cylinder only) Bell like: Y N N/A

Description of exterior surface: _____

Location and depth of marks, pits, gouges of more than 0.015"+: _____

Line corrosion around boot and others accessories: Y N

Comparison to PSI Standards/Manufacturers: Acceptable Marginal Condemn

INTERNAL

Amount and composition of contents : _____

Description of internal surface : _____

Location and estimated depth of any pitting: _____

Comparison to PSI Standards/manufacturers: Acceptable Marginal Condemn

THREADING

Description _____ Number of threads damage _____

Crack assessment (Eddy current) _____ O-ring gland surface _____

Acceptable Marginal Condemn

EDDY CURRENT TEST

Brand of instrument _____ Model _____ Serial number _____

Acceptable Marginal Condemn

VALVE

Burst disk replaced : Y N O-ring Y N Dip tube Y N Service needed Y N

CYLINDER CONDITION

Acceptable Marginal Condemn Sticker affixed (Number _____) Date ____/____/____

Inspector's name, signature _____ and PSI # _____