

REPORT

OF THOROUGH EXAMINATION

AIR COMPRESSOR / AIR RECEIVER



Issued By:



Date of Issue: 14-11-2025

ReportNo.: **DRAFT**

This equipment certificate complies with the requirements of Emirates International Accreditation Centre for inspection bodies working in the field of Pressure Equipment (EIAC-RQ-IB-004), reference standards API 510, NBIC NB23 Part 2, BS 13445-5:2009, ASME BPVC V Section VIII Div 1, and Manufacturer's Specification.

Owner Name: Melvin
Office Address: P.O.Box : 16765,
Jebel Ali
Dubai, U.A.E
Equipment Location: Jebel Ali

INSPECTION DETAILS			
Date of Inspection:	14-11-2025	Expiry Date:	FAILED
Inspection Type:	THOROUGH		
Previous Inspection Report:	check the pdf	Next Hydrotest:	14-11-2025
Test Method	CSI-25	Calibrated Test Equipment:	gh
		Client Test Equipment:	gh
EQUIPMENT INFORMATION			
Equipment Description:	vh		
ID & Serial No.:	gu	Temperature Cut On & Cut off:	hj
Model:	hj	Shell / Core Shell Thickness:	hu
Equipment Type:	yu	Test Pressure (150% for Hydro / 110% for Pneumatic):	vbb
Equipment Manufacturer:	bj	Safety Valve Set Pressure:	bh
Manufacture Year:	14-11-2025	Pressure Cut on & Cut Off:	bj
Capacity of Air Receiver / Tank :	bb	Pressure Gauge Range:	bb
Actual Working Pressure:	vh	Design Pressure	bh
1. Is this the first examination after installation or assembly at a new location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
2. If the answer to the above question is Yes, then has the equipment been installed correctly? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3. Was the inspection carried out in accordance out in accordance with an examination scheme? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

This is to certify that the above item/s described in this certificate was tested and particulars are correct.

CSSC has inventoried, inspected, verified and tested above mentioned equipment in accordance with the reference standards cited herein and consistent with CSSC policies and procedure. We certify this above mentioned equipment is **UNSAFE TO USE**, condition prevails at the time of this inspection.

All the information obtained /gathered during the inspection shall be preserved as confidential.

This inspection has been carried out as per local order no. : 2/2010;

This inspection certificate / report shall not be reproduced except in full without the approval of Claymore and the Client.

Inspected By: Katrina



Name & Signature of Inspector

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EXAMINATION REPORT					
EQUIPMENT PARTS		S	NS	NA	SE
Document verification					
1.	Previous inspection report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Maintenance log sheet	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Mfg. Manual & technical instruction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Source					
4.	Fuel system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Electrical system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Earthing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Air filter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Motor & motor guard / engine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Belt condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Indicators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Emergency switch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vessel					
12.	External condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Identification mark	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Paint/surface	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Corrosion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Drain valve system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	Safety valve system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Automatic pressure load switch on/off	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Automatic temperature load switch on/off	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Pipe connections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	Any leakage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Lubricant	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Suction & inlet fittings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Other valves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25.	Pressure / Temp. Gauges	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support					
26.	Base frames condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27.	Bolt fittings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Accessories					
28.	Fire extinguisher	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29.	Safety instruction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30.	Warning sign	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Load Test					
31.	Hydro test (1.5 times of MAWP/ Pneumatic Test (1.1 times of MAWP)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32.	Hydro test for safety valve (100% & above)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

S-Satisfactory, NS-Not Satisfactory, NA-Not Applicable, SE-Serviceable ♦ Finding ● Critical Finding

Finding:	Critical Finding:	Other Remarks:
Target Date of Closure:	Target Date of Closure:	

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ReportNo.: **DRAFT**

Stage Of Inspection: cgg
Owner Name: Melvin
Equipment Name: Air Compressor / Air Receiver
Equipment Location: Jebel Ali

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