**BREATHING GAS CYLINDER FAILURES-QUARTERLY RETURN**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **YEAR** | **20\_\_** | **QUARTER**  ***(PUT X IN BOX)*** | **Jan/Mar** | **Apr/Jun** | **Jul/Sept** | **Oct/Dec** | **IDEST**  **Test Centre No** |  |

***Please complete all sections* *If no cylinders have failed this quarter, enter “Nil” in the first cylinder number and proceed to valve section below***

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Cylinder Number** | | **Cyl**  **Make** | **Cylinder specification** | **usage** | | **Manu, date**  **Year/month** | | | **Cyl.**  **Cap.** | **Reason for failure (put x in box)** | | | | | | |
| **Threads** | **corrosion** | | **Dent/**  **gouge** | **Hydro**  **test** | **Vis+** | **other** |
| **int** | **ext** |
| 1 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| 2 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| 3 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| 4 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| 5 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| 6 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| 7 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| 8 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| 9 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| 10 |  | | select |  | use | |  | | | cap |  |  |  |  |  |  |  |
| **Put a X in each “reason for failure “there could be more than one entry** | | | | | | | | **TOTALS** | | |  |  |  |  |  |  |  |
| **No.** | | **Valve serial number** | **valve**  **Make** | **valve specification** | | **usage** | **Manu, date year/month** | | | **Valve thread** | **Reason for failure (put x in box)** | | | | | | | |
| **Threads** | **Corrosion int ext** | | **plating** | **Dent/ gouge** | **cracks** | **other** | |
| 1 | |  | make |  | | use |  | | | size |  |  |  |  |  |  |  | |
| 2 | |  | make |  | | use |  | | | size |  |  |  |  |  |  |  | |
| 3 | |  | make |  | | use |  | | | size |  |  |  |  |  |  |  | |
| 4 | |  | make |  | | use |  | | | size |  |  |  |  |  |  |  | |
| 5 | |  | make |  | | use |  | | | size |  |  |  |  |  |  |  | |
| **TOTALS** | | | | | | | | | | |  |  |  |  |  |  |  | |
| **TOTAL NUMBER OF CYLINDERS TESTED BY SIZE** | | | | | | | | | | | **>4** | **5** | **7** | **10** | **12** | **15** | **other** | |
| **GRAND TOTAL** | | | | | | | | |  | |  |  |  |  |  |  |  | |

Please send the completed form to the address shown below to **arrive by the 10th of the month** following the quarter being returned

|  |  |  |
| --- | --- | --- |
| SIGNED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or enter name if form is being submitted electronically | Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Any Individual information submitted on this form is confidential and will not be disclosed to any third parties. It will only be used to compile statistical analyses for the benefit of IDEST members and our industry.** |