

UNIFORM STATUTORY DECLARATION FORM FOR THE REGISTRATION OF FITTING DESIGNS

NEW BRUNSWICK
NUNAVUT

NOVA SCOTIA
YUKON

PRINCE EDWARD ISLAND
NORTHWEST TERRITORIES

NEWFOUNDLAND AND LABRADOR

MANUFACTURERS NAME: Parker Hannifin Instrumental Products Division	
MANUFACTURERS ADDRESS: 1005 A Cleaner Way, Huntsville, Alabama, 35802	
PLANT LOCATIONS: 2651 Highway 21 North, Jacksonville, Alabama, 36285	
<p align="center">CATEGORY OF FITTINGS TO BE REGISTERED. CIRCLE ONE CATEGORY ONLY</p> <p>A Pipe fittings, including couplings, tees, elbows, Ys, plugs, unions, pipe caps, or reducers B Flanges: all flanges C Valves: all line valves D Expansion joints, flexible connections, and hose assemblies: all types E Strainers, filters, separators, and steam traps F Measuring devices, including pressure gauges, level gauges, sight glasses, levels, or pressure transmitters G Certified capacity-rated pressure relief devices acceptable as primary over pressure protection on boilers, pressure vessels, piping and fusible plugs H Pressure retaining components that do not fall into one of the above categories N Nuclear components: Class 1 <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 <input type="checkbox"/> (Meeting CNSC or ASME requirements)</p>	<p align="center">TITLE OF THE STANDARD OF CONSTRUCTION</p> MSS SP-99
<p align="center">SHOW MANUFACTURERS NAME, TRADEMARK, OR LOGO AS IT WILL APPEAR ON THE PRODUCT</p> See attached acceptable product markings	<p align="center">TYPE OF CONSTRUCTION</p> FORGED <input checked="" type="checkbox"/> WELDED <input type="checkbox"/> WROUGHT <input type="checkbox"/> CAST <input type="checkbox"/> OTHER <input type="checkbox"/> DESCRIBE OTHER:
<p align="center">LIST OF SUPPORTING DOCUMENTATION AND IDENTIFICATION OF THE ACTUAL ITEMS TO BE REGISTERED:</p> Scope of Registration Renewal OC9895.5 Parker RL Series Relief Valves (not to be used as primary relief devices for overpressure protection)	

DECLARATION:

I Tony Wzskowski (see note 3) employed by Parker Hannifin Corporation and being the person having full authority and responsibility for the quality of the end product do solemnly declare that the information contained in this form is true and to the best of my knowledge represents the product for which registration is sought. The dimensions, materials of construction, pressure temperature ratings, and identification markings are in accordance with the herein named standards. I further declare that the manufacture of these fittings is regulated by a Quality Control Program which extends to each plant where fabrication occurs in whole or in part and has been verified by Det Norske Veritas as being suitable for that purpose and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

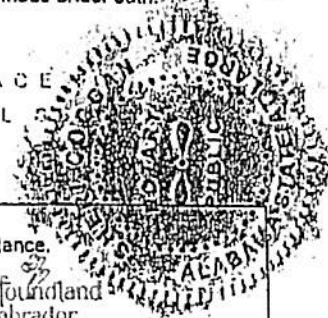
Signature of Declarer: [Signature]

Declared before me at Huntsville, Alabama

This 30th day of January AD 2015

Commissioner of Oaths or Notary Public: (sign) [Signature]

USE THIS SPACE
OFFICIAL



This space for Regulatory Authority use This registration must be revalidated after ten (10) years from the date of acceptance.	
CRN: <u>OC9895.5 REV1</u> FID#: <u>1937</u>	Newfoundland Labrador Service NL Registered <u>OC9895.50 Rev.1</u> Date <u>15/04/17</u> Engineering and Inspection Services Registered by <u>[Signature]</u> UNDER THE AUTHORITY OF THE PUBLIC SAFETY ACT AND THE BOILER AND PRESSURE VESSEL REGULATION 2006/2003 COMPRESSED GAS REGULATIONS
<p>Notes:</p> 1. All fittings shall be registered in the name of the Manufacturer. 2. Each category shall be supported with two Statutory Declaration forms and one copy of supporting documentation. 3. The declaration shall be made by the person having full authority and responsibility for the quality of the end product. 4. Quality control programs shall be resubmitted for validation at a maximum interval of five (5) years.	