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| **DROP TEST RECORD**QA FORM 27 Planning must fill in blocks identified by a ♦ prior to issuing Page \_\_\_\_\_ of \_\_\_\_\_ |
| ♦1. SHIP | HULL NO. | ♦2. JCN | ♦3. LWC/SHOP | ♦4. CWP/REC SER NO**.** | ♦5. SYSTEM/COMPONENT |
|  |  |  |  |  |
| ♦6. REFERENCES(TEST REFERENCE MANUAL(S) AND/OR OTHER APPLICABLE REFERENCES) |
| A.  | B.  | C.  |
| ♦7. REQUIREDTEST AND INSPECTION– SPECIFY TEST REQUIREMENTS [i.e. TYPE OF TEST, SPECIAL VALVE POSITIONS, DURATION, TEST MEDIUM, ACCEPTANCE CRITERIA, JOINTS TO BE TESTED (IF ENTIRE COMPONENT/SYSTEM IS TESTED, SO STATE)]. |
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| ♦8. DIAGRAMOF TEST AREA INCLUDINGGAGS AND BLANKS INSTALLED, VALVE POSITIONS, INITIAL & FINAL TEMPERATURE (IF APPLICABLE) AND TEST GAGES/INSTR USED (DOCUMENT BELOW). |
| 9. GAGE DATA | RANGE (PSIG) | SERIAL # | CAL DUE DATE |
| PRIMARY |  |  |  |
| BACKUP |  |  |  |
| 10. a. REQUIRED TEST PRESSURE (PSIG): b. ACTUAL TEST PRESSURE: | ♦a**.** | b. | 11. a. FINAL PRESSURE AT END OF TEST: b. ACTUAL DURATION: | a. | b. |
| ♦12. ALLOWABLE PRESSURE DROP% IN MINUTES/HOURS | 13. FINAL PRESSURE DROP CORRECTED FOR TEMPERATURE CHANGE |
|  |  |
| 14. TEST MEDIUM: | 15. TEST RESULTS (CHECK ONE): |  **[ ]** SAT **[ ]** UNSAT |
| 16. REMARKS**:** |
| 17. CERTIFICATION |
| PERFORMED BY: |  | INSPECTED BY: |  |
| CRAFTSMAN SIGNATURE | DATE | QA INSPECTOR /SHIPYARD REP  | DATE |
|  | SIGNATURE/BADGE NO. |