



# UPF BOLT TENSIONING INSPECTION RECORD FOR ABOVEGROUND PIPING

Work Package No.: \_\_\_\_\_

Task No.: \_\_\_\_\_

<b>DMC NUMBER:</b>		<b>DATE:</b>	
<b>PROJECT NO.:</b>		<b>PROJECT NAME:</b>	
<b>QUALITY LEVEL:</b> <input type="checkbox"/> Q <input type="checkbox"/> RS <input type="checkbox"/> CC			
<b>BLDG/AREA:</b>		<b>FLANGE LOCATION:</b>	
<b>LINE NUMBER:</b>		<b>ISOMETRIC NUMBER :</b>	<b>REV.:</b>
<b>JOINT ID NUMBER:</b>		<b>FLANGE RATING:</b>	
<b>NUMBER OF BOLTS OR STUDS REQUIRED:</b>		<b>BOLT PATTERN:</b>	
<b>BOLT DIAMETER:</b>		<b>BOLT LENGTH:</b>	
<b>MATERIAL GRADE/SPECIFICATION:</b>	<b>BOLT/STUD:</b>	<b>NUT:</b>	
<b>GASKET TYPE:</b>			
<b>TIGHTENING METHOD:</b>	<input type="checkbox"/> MANUAL TORQUE	<input type="checkbox"/> HYDRAULIC TORQUE	<input type="checkbox"/> HYDRAULIC TENSION
<b>MINIMUM REQUIRED TORQUE OR BOLT TENSION:</b>			
<b>TIGHTENING SEQUENCE TORQUE OR BOLT ELONGATION STEPS (INITIAL AFTER EACH PASS)</b>			
<b>TORQUE/TENSION REQ'D</b>			
<b>BOLT NUMBER</b>	<b>FIRST PASS</b>	<b>SECOND PASS</b>	<b>THIRD PASS</b>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
<b>M&amp;TE USED:</b>			
<b>DESCRIPTION:</b> _____		<b>SERIAL NUMBER:</b> _____	<b>CALIBRATION DUE DATE:</b> _____
<b>DESCRIPTION:</b> _____		<b>SERIAL NUMBER:</b> _____	<b>CALIBRATION DUE DATE:</b> _____
<b>REMARKS:</b>			
<b>OPERATOR:</b>			<b>DATE:</b>
<b>FIELD ENGINEER:</b>			<b>DATE:</b>
<b>QUALITY CONTROL:</b>			<b>DATE:</b>