

**FORM RP-4**  
**FABRICATOR'S PARTIAL DATA REPORT FOR CLASS II VESSELS**  
**A Part of a Fiber-Reinforced Plastic Pressure Vessel Fabricated by**  
**One Fabricator for Another Fabricator**  
**(Revision D — 2017)**

**As Required by the Provisions of the ASME Boiler and Pressure Vessel Code**

1. (a) Fabricated and certified by \_\_\_\_\_  
(name and address of Fabricator of part)

(b) Fabricated for \_\_\_\_\_  
(name and address of Purchaser of vessel)

2. Identification—Fabricator's serial no. of part \_\_\_\_\_

3. (a) Constructed according to Drawing no. \_\_\_\_\_ Dwg. prepared by \_\_\_\_\_

(b) Description of part fabricated and inspected \_\_\_\_\_

4. Part fabricated in accordance with Procedure Specification no. \_\_\_\_\_ Date \_\_\_\_\_

5. ASME Section X \_\_\_\_\_  
(Edition and Addenda (if applicable) Date) \_\_\_\_\_ (Code Case No.) \_\_\_\_\_

6. SHELL: Type \_\_\_\_\_ Nominal thickness \_\_\_\_\_ Fibers \_\_\_\_\_ Resin \_\_\_\_\_  
(contact molded, filament wound) (glass, etc.) (epoxy, etc.)

Nominal weight \_\_\_\_\_ Diameter \_\_\_\_\_

Length \_\_\_\_\_ Barcol hardness \_\_\_\_\_

7. HEADS: Type \_\_\_\_\_  
(contact molded, centrifugally cast, filament wound)

Attachment \_\_\_\_\_  
(integral, adhesive bonding, bolted, quick opening, etc.)

(a)

Location (Top, Bottom, Ends)	Nominal Thickness	Barcol Hardness	Nominal Weight	Shape or Contour (Describe, giving radii, angle, ratios, where appropriate)
(1) _____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____

(b) If bolted, bolts used  
(Material, Spec. no., T. S., size, number)

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(c) If quick opening or other  
(Describe or attach sketch)

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(d) If filament wound, describe pole pieces or head fittings

(1) \_\_\_\_\_

(2) \_\_\_\_\_

8. Fabricated for  
Maximum allowable working pressure \_\_\_\_\_ at maximum allowable temperature \_\_\_\_\_

Minimum allowable temperature [when less than -20°F (-29°C)] \_\_\_\_\_

9. NDE \_\_\_\_\_ (AE, RT, etc.)

10. SAFETY VALVE OUTLETS: Number \_\_\_\_\_ Size \_\_\_\_\_ Location \_\_\_\_\_

11. NOZZLES

Purpose (Inlet, Outlet, Drain)	Number	Diameter or Size	Type	Material	Thickness	Reinforcement Material	How Attached
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

**FORM RP-4 (Back)**  
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**12. INSPECTION OPENINGS**

Manholes: No. \_\_\_\_\_ Size \_\_\_\_\_ Location \_\_\_\_\_  
Handholes: No. \_\_\_\_\_ Size \_\_\_\_\_ Location \_\_\_\_\_  
Threaded: No. \_\_\_\_\_ Size \_\_\_\_\_ Location \_\_\_\_\_

**13. SUPPORTS:** Skirt \_\_\_\_\_ Lugs \_\_\_\_\_ Legs \_\_\_\_\_ Other \_\_\_\_\_  
(yes or no) (number) (number) (describe)  
Attached \_\_\_\_\_  
(where and how)

**14. REMARKS**

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in this Fabricator's Partial Data Report are correct and that all details of materials, fabrication, and workmanship of this vessel conform to Section X of the ASME BOILER AND PRESSURE VESSEL CODE, Fiber-Reinforced Plastic Pressure Vessels, Class II.

Date \_\_\_\_\_ Signed \_\_\_\_\_ by \_\_\_\_\_  
(Fabricator) (representative)

Certificate of Authorization no. \_\_\_\_\_ Expires \_\_\_\_\_  
(date)

**CERTIFICATE OF SHOP INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and employed by \_\_\_\_\_ of \_\_\_\_\_ have inspected the part of a pressure vessel described in this Fabricator's Partial Data Report on \_\_\_\_\_ and state that, (date) to the best of my knowledge and belief, the Fabricator has constructed this part in accordance with the applicable Sections of the ASME BOILER AND PRESSURE VESSEL CODE.

By signing this certificate, neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the part described in this Fabricator's Partial Data Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or loss of any kind arising from or connected with this inspection.

Date \_\_\_\_\_

\_\_\_\_\_  
(Authorized Inspector's signature) Commission \_\_\_\_\_  
(National Board Authorized Inspector Number)