

DOBSON OILFIELD SERVICES

CSA Z662 QUALITY SYSTEM PRE-JOB REVIEW

Owner: _____ Contractor: _____

Location: (from) _____ to _____

Job No.: _____

Line numbers can be grouped together by material, pressure and inspection type, but should be differentiated into – below ground piping – above ground piping – and having any different requirements. (Use more than one sheet)

Line No(s).	Service Description Eg. (Pipeline, high-line, flare)	Size	Wall thickness	Class / PN	Material Spec. and Grade CSA or equivalent (Table 5.3)
1					
2					
3					

Line No(s).	MPI / LPI Extent %	Radiography Extent %	Hardness Testing	Ultrasonic - Other NDE Description / Extent %	Other Requirements
1					
2					
3					

Line No(s).	Design Temperature Min. / Max.	Design Pressure	Test Pressure	Test Medium	Other Requirements
1					
2					
3					

Weld procedures used: _____

NDE Contractor _____

PWHT Y/N _____ Contractor _____

Approved by Owner _____ Date: _____

Approved by Contractor _____ Date: _____

Comments _____

WORK COMPLETED AND ACCEPTED

Approved by Owner _____ Date: _____

Approved by Contractor _____ Date: _____