**Pressure System / Vessel Registration Form *(PSR1 Form)***



This Form can be used to register and de-register a pressure system / vessel and to notify system modifications. Please complete electronically and return as indicated below.

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| 1. **New Pressure System Registration / 2. Existing Pressure System Modifications**

**/ 3. De-registration** *(please delete* ***1., 2., or 3.*** *as appropriate)* |
| **PRESSURE SYSTEM / VESSEL**  |
| Age of Pressure System (approx) |  |
| Make & Model |  |
| Type of Equipment (eg autoclave) |  |
| Serial Number |  |
| ID Tag Reference Number |  |
| System Capacity |  |
| System Content (eg Argon) |  |
| Working Pressure (PSI or bar litres) |  |
| Is it part of building’s pressure system ie built into the building? (circle) | YES | NO |
| Replacement / Expiry Date (if available) |  |
| Modification – provide summary |  |
| **ITEM LOCATION** |
| College / School / Service  |  |
| Building Name |  |
| Floor Number |  |
| Room Number |  |
| **COLLEGE / SCHOOL / SERVICE CONTACT DETAILS** |
| **User’s Contact Details** | Name: |  |
| Ext No: |  | Email: |  |
| **Nominated PersonContact Details** | Name: |  |
| Ext No: |  | Email: |  |
| **Date** |  |
| **Email completed Form as an attachment to Insurance Officer**,**i.g.phillips@bangor.ac.uk** **and cc** **healthandsafety@bangor.ac.uk** **and Campus Services at** **maintenance@bangor.ac.uk** **if the system impacts on the building infrastructure** |