

COMPRESSOR SPECIFICATIONS SHEET
THIS FORM MUST BE COMPLETED AND RETURNED WITH CYLINDER

CUSTOMER INFORMATION	
Company Name	
Address	
Contact Person	
Purchase Order Number	
Telephone Number	
Email Address	
Sample Cylinder Number (e.g. HP 99)	
<input type="checkbox"/> Analysis to CSA Standard Z275.2 for diving operations <input type="checkbox"/> Analysis to CSA Standard Z180.1 for breathing air	
Compressor Specifications	
Make & Model Number	
Serial Number	
Line Pressure While Collecting Sample	
Duration of Flow	
Compressor System (<i>check one</i>)	<input type="checkbox"/> HP (2000-6000 psig); operating pressure _____ psig <input type="checkbox"/> LP (50-200 psig); operating pressure _____ psig <input type="checkbox"/> Ambient; operating pressure _____ psig
Purification System Specifications	
Make & Model Number	
Serial Number	
Identify the components included in the purification train of the referenced purification system: ____ Mechanical separator ____ Water vapour desiccant ____ Activated charcoal ____ Catalytic CO converter ____ Final particulate filter ____ Carbon monoxide alarm	
Location in the breathing air system from which the sample was obtained:	
Hours of operation since last filter change:	

I certify that the information provided on this form is correct and the sample submitted in the cylinder is from the location indicated and produced by the compressor and/or purification system identified on this form.

Signature

Title/Position

Date