IWP HYDROTESTING CHECKLIST

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|  | | MAJOR PROJECTS |
| **Appendix - 14** |
| **Department:** | CONSTRUCTION | Number: **PCM-CP-000X-14** |
| **Subject:** | IWP HYDROTESTING CHECKLIST | Revision:  **A** |

| **IWP ID Number:** | | | **Date Prepared:** | | |
| --- | --- | --- | --- | --- | --- |
| **IWP Description:** | | | | | |
| **ITEM DESCRIPTION** | | **YES / NO / N/A** | | **COMMENTS** | |
| **Hydrotest Package Shall:**  a) Be Assigned A Unique Identification Number  b) Be Listed In Hydrotest Log  c) Have Clearly Identified Limits Indicated On Master Hydrotest P&ID’s | |  | |  | |
| System, Spool, Tubing Etc To Be Tested Shall Have ID Number And Limits Clearly Indicated And Marked On Package Drawings And Documents | |  | |  | |
| Blinds, Paddles, Gaskets And Bolts Required For Hydrotest Clearly Identified, Listed, Onsite And Ready For Use | |  | |  | |
| Inline Instruments To Be Removed And Blinds Or Temporary Spools Installed Clearly Identified And Listed | |  | |  | |
| All Valve Handwheel/Actuator Positions (Open/Closed) Clearly Indicated And Marked On Drawings | |  | |  | |
| All Check Valve Flappers To Be Removed For Test Clearly Indicated And Marked On Drawings | |  | |  | |
| All Welded Attachment Welded Prior to Filling With Water | |  | |  | |
| Release For Hydrotesting Signed-Off By QC | |  | |  | |
| **Crane(s) To Support Work Package:**  Onsite  Available  Scheduled | |  | |  | |
| Required Rigging And Accessories Onsite And Available To Support Work Package Activities | |  | |  | |
| **Transportation Requirements For Testing Equipment, Temporary Spools, Materials And Tools Etc.:**  Available  Scheduled | |  | |  | |
| Material Requisitions Complete Ready To Be Submitted For Work Package | |  | |  | |
| Materials In Warehouse Bagged And Tagged | |  | |  | |
| **Special Training / Qualification Requirements:**  a) Safety; SCABA, High Level Rescue Etc  b) Equipment Operation; Manlift Etc.  c) Other  d) Training Complete | |  | |  | |
| Permit Requests Complete Ready To Be Submitted For Work Package | |  | |  | |
| Safety Items And Concerns Clearly Identified,  Listed And Addressed | |  | |  | |
| **Hazard Assessments / Requirements:**  a) Hazard Identified  b) Assessment Performed  c) Mitigated | |  | |  | |
| Additional Personnel Protection Equipment Requirements Clearly Identified, Listed, Onsite And Available For Use | |  | |  | |
| Inspection And Testing Requirements Clearly Identified And Listed Including Hold And Witness Points | |  | |  | |
| Hydrotesting Equipment Onsite, Calibrated (Up To Date) And Available For Use | |  | |  | |
| **Hydrotest Water:**  a) Is There A Requirement For Desalinated Water For Stainless Steel  b) Water Available  c) Scheduled For Delivery | |  | |  | |
| Hydrotest Water Disposal Requirements Clearly Identified | |  | |  | |
| **Third Party Inspection Required:**  a) Available  b) Scheduled | |  | |  | |
| **Vendor Requirements:**  a) Required  b) Available  c) Scheduled | |  | |  | |
| **Scaffolding / Manlift Requirements:**  a) Identified  b) Available  c) Scheduled  d) Built (Scaffold Only) | |  | |  | |
| **All Required Drawings, Details And Specifications Included In Hydrotest Work Package:**  a) Hydrotest Sign-Off Sheet  b) P&ID’s Clearly Marked With Hydrotest Limits (As-Built)  c) Isometrics Clearly Marked With Hydrotest Limits (As-Built)  d) General Arrangements Clearly Marked With Hydrotest Limits (As-Built)  e) Line Designation Table (Line List) Indicating Lines To Be Tested  f) Pipe Support Details  g) Special Requirements  h) Design Change Notices (If Applicable)  i) Request For Information (If Applicable)  j) QC Release For Testing (Signed-Off)  k) Hydrotest Checklist  l) Lessons Learned Suggestion Form  **NOTE:**  All Documents Included In Hydrotest Package Shall Be Clearly Marked With Hydrotest Package Identification Number | |  | |  | |
| **Hydrotest System / Package Status:**  a) Hydrotest Package Prepared Ready For Use  b) Hydrotest System Ready For Testing  c) Hydrotest Complete  d) Sign-Off Sheet Signed By All Parties  e) System Ready For Reinstatement | |  | |  | |
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| **Planner Name (print):** | **Planner Signature:** | | | | **Issue Date:** |
| **Superintendent Name (Print):** | **Superintendent Signature:** | | | | **Issue Date:** |
| **Work Foreman Name:** | **Work Foreman Signature:** | | | | **Work Start Date:** |
| **Work Foreman Name:** | **Work Foreman Signature:** | | | | **Work Completion Date:** |