

# Proof Test Inspection Report Form

Company Name					OFSM E#	Technician & EE#				Date						
Customer	Serial Number	DOT/ICC Service Pressure	Brand	Size	UL Rating	Type	Condition	Test Pressure	Cylinder Inspected					Disposition	Inspector's Initials	Notes
									Corrosion/Pitting	Dents	Leaks	Fire Damage	Bulges			
1																
2																
3																
4																
5																
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**Cylinder Condition Codes**

- 1 - Good
- 2 - Fair
- 3 - Bad
- 4 - Burned
- 5 - Other

**Disposition Code**

- A - Returned to Service
- B - Scrapped
- C - Hold for Repair

**Quarterly Test Gauge Accuracy Check**

\_\_\_\_\_ by \_\_\_\_\_  
(date)