

**UNIFORM STATUTORY DECLARATION FORM FOR THE REGISTRATION OF FITTING DESIGNS**New Brunswick  
NunavutNova Scotia  
YukonPrince Edward Island  
Northwest Territories

Newfoundland and Labrador

Manufacturers Name: <b>NEWMAN FLANGE &amp; FITTING CO.</b>	
Manufacturers Address: <b>1649 L STREET NEWMAN, CA 95360 USA</b>	
Plant Locations: <b>1649 L STREET NEWMAN, CA 95360 USA</b>	
<b>Category of Fittings to be registered. Circle one Category only:</b> <input type="radio"/> A Pipe fittings, including couplings, tees, elbows, Ys, plugs, unions, pipe caps, or reducers <input checked="" type="radio"/> B Flanges; all flanges <input type="radio"/> C Valves; all valves <input type="radio"/> D Expansion joints, flexible connections, and hose assemblies; all types <input type="radio"/> E Strainers, filters, separators, and steam traps <input type="radio"/> F Measuring devices, including pressure gauges, level gauges, sight glasses, levels, or pressure transmitters <input type="radio"/> G Certified capacity-rated pressure relief devices acceptable as primary over pressure protection on boilers, pressure vessels, piping and fuel gas plugs <input type="radio"/> H Pressure retaining components that do not fall into one of the above categories <input type="checkbox"/> N Nuclear components: Class 1 <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 <input type="checkbox"/> (Meeting CNSC or ASME requirements)	<b>Title of the Standard of Construction</b>  <b>ASME B16.5, B16.1, B16.36, B16.47, B16.48</b>
<b>Show Manufacturers Name, Trademark, or Logo as it will appear on the product</b>  <b>NF</b>	<b>Type of Construction</b> Forged <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Wrought <input type="checkbox"/> Cast <input type="checkbox"/> Other <input type="checkbox"/> Describe other:
<b>List of supporting documentation and identification of the actual items to be registered:</b> <b>ISO 9001:2015 Certification</b> <b>Dimensions and drawings for flanges manufactured</b> <b>ASME/ASTM Material specifications</b>	

**Declaration:**

I, Uvaldo Mendoza (see note 3) employed by Newman Flange & Fitting Co. and being the person having full authority and responsibility for the quality of the end product do solemnly declare that the information contained in this form is true to the best of my knowledge represents the product for which registration is sought. The dimensions, materials of construction, pressure temperature ratings, and identification markings are in accordance with the herein named standards. I further declare that the manufacture of these fittings is regulated by a Quality Control Program which extends to each plant where fabrication occurs in whole or in part and has been verified by TUV SUD America Inc. as being suitable for that purpose and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

Signature of Declarer: [Signature]

Declared before me at \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_ AD \_\_\_\_\_

Commissioner of Oaths

Or Notary Public: (sign) \_\_\_\_\_

(Affix Official seal to the right)

Use this space for the Official Seal

Please see attached Certification  
 Juv. Cynthia Caetano "Notary Public"

This registration must be revalidated after ten (10) years from the date of acceptance. <b>ACCEPTED</b> <b>PROVINCE OF PRINCE EDWARD ISLAND</b> <b>COMMUNITIES, LAND &amp; ENVIRONMENT</b> C.R.N. <u>0B0612.9 Rev2</u> DATE: <u>May 13/19</u> <b>INSPECTION SERVICES SECTION</b> <b>BOILER/PRESSURE VESSEL BRANCH</b> Sect 1.0 - Fittings Rev.2	
CRN: <u>0B0612.9</u> REV2 FID#: <u>1100</u> Notes: 1. All Fittings shall be registered in the name of the Manufacturer. 2. Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation. 3. The Declaration shall be made by the person having full authority and responsibility for the quality of the end product. 4. Quality Control programs shall be resubmitted for validation.	This space for Regulatory Authority use.