



Brazer Qualification Record

In Compliance with NFPA 99 and ASME Code Section IX

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Name of Brazer: 1. (Brazer's Printed Name) Brazer Identification Number: 2. Last 6 SSN Digits
 Braze Test Date: 3. (Date of Braze) Braze Procedure Specification followed: 13-BPS148

Brazeing Qualification Limits		
Brazeing Variables	Actual Values	Ranges Qualified
Brazeing Process	Manual Torch	Manual Torch
Method of Cleaning	3M Pad, Cloth Wipe, SS Wire Brush	3M Pad, Cloth Wipe, SS Wire Brush
Base Metals P-Number	P-300	P-300
First Base Metal Thickness	0.060"	0.030" to 0.120"
Second Base Metal Thickness	0.051"	0.026" to 0.102"
Joint Type	Socket	Socket & Lap
Joint Clearance	0.001" to 0.010"	0.001" to 0.010"
Joint Overlap Length	1.09"	1.36" maximum
Internal Purge Gas	Oil Free Dry Nitrogen @ 5 to 10 CFH	Oil Free Dry Nitrogen @ 5 to 10 CFH
First Brazeing Flow Position	Horizontal	All Flow Positions
Second Brazeing Flow Position	Vertical Up	
Filler Metal Product Form	Face Fed Rod	Face Fed Rod
Filler Metal Specification	BCuP 2	All BCuP Series Rod
Filler Metal F-Number	F-103	F-103

Examination Results
Visual Examination of Completed Braze Assembly (QB-141.6): Acceptable (no signs of flaking or internal oxidation)
Test Lab Sectioning Test Results (QB-181): Acceptable

We certify that the statements in this record are correct and that the test coupons were prepared, brazed, and tested in accordance with requirements of NFPA 99 and Section IX of the ASME Code.

4. (Print ATR/Representative Name) 5. (Signature of ATR/Representative) (Date of Braze)
 NITC Representative/Authorized Testing Representative Name NITC Representative/Authorized Testing Representative Signature Date:

6. (Print Contractor/Supervisor's Name) 7. (Signature of Contractor/Supervisor's) (Date of Braze)
 Manufacturer/Contractor Company Name Manufacturer/Contractor Representative Signature Date:

National ITC Corporation _____ _____
 Certified Test Lab Company Name Certified Test Lab Representative Signature Date:

The undersigned contractor hereby adopts this Brazer Qualification Record and accepts the responsibility for construction of brazements performed by the Brazer in accordance with the Contractor's Brazeing Procedure Specifications.

_____ _____ _____
 Manufacturer/Contractor Company Name Manufacturer/Contractor Representative Signature Date: