

**FORM CA-1-1 CERTIFICATE OF CONFORMANCE FOR REAPPLICATION OF THE ASME SINGLE CERTIFICATION MARK
In Accordance With Provisions of the ASME CA-1 Standard**

1. Manufactured by: _____ (Name and address)
2. Manufactured for: _____ (Name and address)
3. Location of Installation: _____ (Name and address)
4. Item Description: _____
(Boiler/pressure vessel, etc.) (Mfg. Data Report Form) (Symbol Stamp or Designator applied) (Year built)
5. Item Identification: _____
(Manufacturer's Serial no.) (National Board no.) (Jurisdiction no.) (Other)
6. Original Construction Code: _____
(Name/Section/Division) (Edition/Addenda, if applicable) (Code Cases)
7. Traceability to Code Certification. (Attach a copy of the original Manufacturer's Data Report.):

8. Remarks:

REAPPLICATION REQUEST

Authorization is requested to have the ASME Single Certification Mark and designator reapplied on the above described item in accordance with the rules of the ASME CA-1 Standard.

Owner _____ (Name and address)

Signature _____ Title _____ Date _____
(Authorized Representative)

JURISDICTIONAL AUTHORIZATION

Authorization is granted to reapply the ASME Single Certification Mark and designator on the above described item in accordance with the rules of the ASME CA-1 Standard.

Jurisdiction _____

Signature _____ Date _____
(Authorized Representative)

REAPPLICATION CERTIFICATION

I certify that to the best of my knowledge and belief, the statements in this Certificate of Conformance are correct and that the reapplication of the ASME Single Certification Mark and designator is in accordance with provisions of the ASME CA-1 Standard. Furthermore, it is understood that reapplication of the ASME Single Certification Mark and designator is provided to restore evidence of original compliance with the construction code and is not to be construed as endorsement of the identified item in its current condition.

Original Manufacturer _____ (Name and address)

Responsible Successor Organization _____ (Name and address)

Signature _____ Date _____
(Authorized Representative)

Designator _____ Certificate of Authorization No. _____ Expiration Date _____

DESIGNATED OVERSIGHT BY: AIA QIO CI

CERTIFIED INDIVIDUAL

N/A

I, the undersigned, as an authorized Certified Individual employed by _____ have inspected the reapplication of the ASME Single Certification Mark and designator as described in this Certificate of Conformance, and state to the best of my knowledge and belief the activities described herein have been completed in accordance with rules of the ASME CA-1 Standard.

Inspected by _____ Signature _____ Date _____
(Name of individual)

AUTHORIZED INSPECTION AGENCY/QUALIFIED INSPECTION ORGANIZATION

N/A

I, the undersigned, employed by _____ have inspected the reapplication of the ASME Single Certification Mark and designator as described in this Certificate of Conformance, and state to the best of my knowledge and belief the activities described herein have been completed in accordance with rules of the ASME CA-1 Standard. By signing this certificate, neither the inspector nor his or her employer makes any warranty, expressed or implied, concerning the activity described in this Certificate of Conformance. Furthermore, neither the inspector nor his or her employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Inspected by _____ Signature _____ Date _____ Commission _____
(Inspector) (Jurisdiction, if applicable)