

INSTRUCTIONS FOR COMPLETING THE FORM NB-136, REPLACEMENT OF STAMPED DATA FORM

Items 1-13 shall be completed by the owner, user, original manufacturer, or "R" Certificate Holder making the request.

- 1) Enter purchase order number, job number, or other identifying number used by your company if applicable.
- 2) The name, address, and phone number of the Jurisdiction, Authorized Inspection Agency (when there is no Jurisdiction) to which the form is being submitted for approval.
- 3) Enter the name and address of the requester's company or organization.
- 4) Enter the name, email, and phone number of the person within the requester's company or organization who can be contacted if there are any questions concerning this request.
- 5) Enter the name and address of the location where the pressure-retaining item is installed. If this is the same as number 3, check the box "Same as# 3". If the pressure-retaining item is being refurbished and the final installation location is unknown, check the box "Stock Item-Unknown".
- 6) Enter the date the pressure-retaining item was installed. If unknown check the box "Unknown."
- 7) Enter the name of the manufacturer of the pressure-retaining item for whom the request is being submitted.
- 8) Is the Manufacturer's Data Report attached to the form? Check the appropriate box.
- 9) Is the pressure-retaining item registered with the National Board? Check the appropriate box. If yes, provide the National Board Registration Number.
- 10) Provide as much information as known to help identify the pressure-retaining item.
- 11) Provide a true facsimile of the legible part of the nameplate or stamping.
- 12) Attach any other documentation that helps provide traceability of the vessels to the original stamping, such as purchase orders, blueprints, inspection reports, etc.
- 13) Provide the name of the owner, user, original manufacturer, or "R" Certificate Holder making the request. If an "R" Certificate Holder is making the request, provide the "R" Certificate Number. Provide the signature of the requester and date requested.
- 14) To be completed by the Jurisdiction or Authorized Inspection Agency's authorized representative.

If the original manufacturer is currently in business, concurrence shall be obtained by the owner or user.

The requester shall submit the form along with any attachments to the jurisdiction where the pressure-retaining item is installed for approval. If there is no jurisdiction or the pressure-retaining item is a stock item, the requester shall submit the form to a National Board Commissioned Inspector for approval.

After authorization, the form will be returned to the owner, user, original manufacturer, or "R" Certificate Holder who made the request. The requester is required to contact the jurisdiction or

an Authorized Inspection Agency to provide a National Board Commissioned Inspector to witness the re-stamping or installation of the new nameplate. If the nameplate is being welded to the pressure-retaining boundary of the vessel, the welding shall be done by an "R" Certificate Holder. The requester will provide the new nameplate or have on hand the tools to do the re-stamping in accordance with the original code of construction.

- 15) Once the re-stamping is completed, or the new nameplate is attached, the requester shall provide a true facsimile of the replacement stamping.
- 16) The owner, user, original manufacturer, or "R" Certificate Holder shall fill in their name (and "R" Certificate Number if an "R" Certificate Holder), signature, and date.
- 17) To be completed by the National Board Commissioned Inspector who witnessed the re-stamping or installation of the new nameplate.

Note: Once the form is completed, the requester shall file a copy with the jurisdiction where the pressure-retaining item is installed, the National Board, and the owner or user of the vessel (if the request was made by the original manufacturer or the "R" Certificate Holder), and upon request to the Authorized Inspection Agency who witnessed the re-stamping or attachment of the new nameplate.

REPLACEMENT OF STAMPED DATA FORM, NB-136

in accordance with provisions of the *National Board Inspection Code*

1. _____
(P.O. no., job no., etc.)

2. SUBMITTED TO: _____
(Name of Jurisdiction)

(Address)

(Telephone no.)

3. SUBMITTED BY: _____
(Name of Owner, User, Original Manufacturer, or "R" Certificate Holder)

(Address)

4. _____
(Name of contact) (Email) (Telephone no.)

5. LOCATION OF INSTALLATION: SAME AS #3 STOCK ITEM – UNKNOWN

(Name)

(Address)

6. DATE INSTALLED: _____ UNKNOWN

7. MANUFACTURER: _____
(Name)

8. MANUFACTURER'S DATA REPORT ATTACHED: NO YES

9. ITEM REGISTERED WITH NATIONAL BOARD: NO YES, NB NUMBER: _____

10. ITEM IDENTIFICATION: _____
(Type) (Mfg. serial no.) (Jurisdiction no.) (Year built)

(Dimensions) (MAWP psi) SAFETY RELIEF VALVE SET AT: _____
(psi)

11. PROVIDE A TRUE FACSIMILE OF THE LEGIBLE PORTION OF THE NAMEPLATE: ATTACHED

THE FOLLOWING IS A TRUE FACSIMILE OF THE LEGIBLE PORTION OF THE ITEM'S ORIGINAL NAMEPLATE (IF AVAILABLE). PLEASE PRINT. WHERE POSSIBLE, ALSO ATTACH A RUBBING OF PICTURE OF THE NAMEPLATE.

12. TRACEABILITY DOCUMENTATION – PROVIDE ANY DOCUMENTATION THAT WILL HELP THE JURISDICTION OR INSPECTOR VERIFY THE REQUESTED RE-STAMPING OR REPLACEMENT NAMEPLATE IS IN ACCORDANCE WITH THE ORIGINAL CODE OF CONSTRUCTION FOR THIS PRESSURE-RETAINING ITEM. ATTACHED

(P.O. no., job no., etc. from line 1)

13. I REQUEST AUTHORIZATION TO REPLACE THE STAMPED DATA OR NAMEPLATE ON THE ABOVE DESCRIBED PRESSURE-RETAINING ITEM IN ACCORDANCE WITH THE RULES OF THE *NATIONAL BOARD INSPECTION CODE* (NBIC).

NAME: _____ NUMBER: _____
(Owner, User, Original Manufacturer, "R" Certificate Holder) ("R" Certificate Holder only)

SIGNATURE: _____ DATE: _____
(Authorized Representative)

14. BASED ON THE TRACEABILITY PROVIDED, AUTHORIZATION IS GRANTED TO REPLACE THE STAMPED DATA OR TO REPLACE THE NAMEPLATE OF THE ABOVE DESCRIBED PRESSURE-RETAINING ITEM.

SIGNATURE: _____ DATE: _____
(Authorized Jurisdictional Representative or Inspector)

NATIONAL BOARD COMMISSION NO.: _____ JURISDICTIONAL NUMBER: _____
(if available)

15. THE FOLLOWING IS A TRUE FACSIMILE OF THE ITEM'S REPLACEMENT STAMPING OR NAMEPLATE (must clearly state "replacement")

16. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE STATEMENTS IN THIS REPORT ARE CORRECT, AND THAT THE REPLACEMENT INFORMATION, DATA, AND IDENTIFICATION NUMBERS ARE CORRECT AND IN ACCORDANCE WITH THE PREVISIONS OF THE *NATIONAL BOARD INSPECTION CODE* (NBIC).

NAME: _____ NUMBER: _____
(Owner, User, Original Manufacturer, "R" Certificate Holder) ("R" Certificate Holder only)

SIGNATURE: _____ DATE: _____
(Authorized Representative)

17. WITNESSED BY: _____ EMPLOYER: _____
(Name of Inspector)

SIGNATURE: _____ DATE: _____ NB COMMISSION: _____
(Name of Inspector)