**ESM Chapter 13, Vol. 6, ITM-1306-NDE-LT-201-FM01 Rev. 0, 3/11/2019**

***Positive Pressure Decay Method***

#  Test Data Sheet

**General**

**Test Recordings**

NOTE: ENTER “NA” FOR ANY ITEM THAT IS NOT APPLICABLE

Test Number: Test Date: Code of Record:

Project Number: Project Name: Spec or Procedure:

Area: Bldg: Work Package Number:

Test Start Time: \_\_\_\_ Test End Time: \_\_\_\_\_\_ Test Duration: \_\_\_\_\_

Initial Pressure: \_\_\_\_\_\_\_\_  Final Pressure: \_\_\_\_\_ Pressure Change: \_\_\_\_\_

Surface Temperature @ Test Start Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ @ Test Finish Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gas Temperature @ Test Start Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ @ Test Finish Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Acceptance Criteria:

Calculated Leak Rate: \_\_\_\_\_\_\_\_\_\_\_\_\_

Is the **ACTUAL** Leak Rate equal to or less than the Calculated Leak Rate using Calculations above?

Yes (Passed Test) \_\_\_\_\_\_\_\_\_\_\_\_ No (Failed Test) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Examiner Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Z Number: \_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_ Level: \_\_\_\_\_\_\_\_\_\_\_\_

Examiner Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Z Number: \_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_ Level: \_\_\_\_\_\_\_\_\_\_\_\_

Inspector Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Z Number: \_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

**Test Results Data**

Test Rig Description (add pages as necessary): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pressure Gauge Make, Model and Range: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Attach current calibration Data Record including calibration dates

Temperature gauge Make and Model \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Attach current calibration Data Record including calibration dates

Dry Bulb or Dew Point Measuring Instruments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Attach current calibration Data Record including calibration dates

**Test Equipment**

Verification of Pre Test Surface Prep acceptable: \_\_\_ Yes, \_\_\_\_No Soak Time: \_\_\_\_\_

Test Pressure: \_\_\_\_\_\_\_\_\_ units (psig): \_\_\_\_\_

Recording Interval: \_\_\_\_ unit (min): \_\_\_\_\_\_\_\_\_

Data Recorded each Interval: \_\_\_Pressure,   \_\_\_Temperature,  \_\_\_Humidity

Surface Temperature: \_\_\_\_\_\_\_\_ Gas Temperature: \_\_\_\_\_\_\_

Verification of Post Test Cleaning: \_\_\_ Yes, \_\_\_\_No

**Test Information**

Test System Description (add pages as necessary):

Description of Test Boundaries:

ML: \_\_\_\_ 1 \_\_\_\_ 2 \_\_\_\_ 3 \_\_\_\_ 4 Test Method: \_\_\_\_\_ Pressure Change - Positive Pressure Change Method

Test Method: \_\_\_\_\_ Pressure Change - Vacuum Decay