


UNIFORM STATUTORY DECLARATION FORM FOR THE REGISTRATION OF FITTING DESIGNS

NEW BRUNSWICK  
NUNAVUT

NOVA SCOTIA  
YUKON

PRINCE EDWARD ISLAND  
NORTHWEST TERRITORIES

NEWFOUNDLAND AND LABRADOR

MANUFACTURERS NAME: The Clark-Reliance Corporation	
MANUFACTURERS ADDRESS: 16633 Foltz Parkway, Strongsville, OH 44286 USA	
PLANT LOCATIONS: Same	
<b>CATEGORY OF FITTINGS TO BE REGISTERED. CIRCLE ONE CATEGORY ONLY</b> A Pipe fittings, including couplings, tees, elbows, Ys, plugs, unions, pipe caps, or reducers B Flanges: all flanges C Valves: all line valves D Expansion joints, flexible connections, and hose assemblies: all types E Strainers, filters, separators, and steam traps <input checked="" type="checkbox"/> F Measuring devices, including pressure gauges, level gauges, sight glasses, levels, or pressure transmitters G Certified capacity-rated pressure relief devices acceptable as primary over pressure protection on boilers, pressure vessels, piping and fusible plugs H Pressure retaining components that do not fall into one of the above categories N Nuclear components: Class 1 <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 <input type="checkbox"/> (Meeting AECB or ASME requirements)	TITLE OF THE STANDARD OF CONSTRUCTION  ASME B31.1, B31.3
SHOW MANUFACTURERS NAME, TRADEMARK, OR LOGO AS IT WILL APPEAR ON THE PRODUCT  <b>JACOBY-TARBOX®</b> OR  <small>A PRODUCT OF CLARK-RELIANCE</small> <small>ENHET FLOW INDUSTRIES A CLARK-RELIANCE COMPANY</small>	TYPE OF CONSTRUCTION FORGED <input type="checkbox"/> WELDED <input checked="" type="checkbox"/> WROUGHT <input type="checkbox"/> CAST <input type="checkbox"/> OTHER <input type="checkbox"/> DESCRIBE OTHER: <u>BOLTED</u>
LIST OF SUPPORTING DOCUMENTATION AND IDENTIFICATION OF THE ACTUAL ITEMS TO BE REGISTERED: ISO9001:2008 Certificate CSA-B51-09 Certificate Continued: See Index of Attachments	

DECLARATION:

I Steven McGuigan (see note 3) employed by Clark-Reliance 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 and 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 HSB Registration Services 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 16633 FOLTZ PKWY.

This 12 day of May AD 2014

Commissioner of Oaths or Notary Public: (sign) [Signature]  
(Affix Official seal to the right)

USE THIS SPACE FOR THE OFFICIAL SEAL

CHRISTINE McCOMBS  
NOTARY PUBLIC, LORAIN COUNTY, OHIO  
MY COMMISSION EXPIRES 9 JULY 2015

This space for Regulatory Authority use

This registration must be revalidated after ten (10) years from the date of acceptance.

CRN: 0F16975.5

FID#: 522

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 at a maximum interval of five (5) years.

ACCEPTED  
 PROVINCE OF PRINCE EDWARD ISLAND  
 ENVIRONMENT, LABOUR & JUSTICE

C.R.N. 0F16975.59  
 DATE: July 18/14

INSPECTION SERVICES SECTION  
 BOILER/PRESSURE VESSEL BRANCH