

BLANK CHECK SHEET OF TANK / VOID

FROM: (COMPANY NAME OR SHOP)	SIGNATURE OF REPRESENTATIVE	DATE
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SHIP	JOB ORDER NO.
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INSPECTION ITEM <b style="text-align: center;">REMOVAL OF BLANKS AND PLUG	COMPARTMENT NO.
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LOCATION (FILL X AS APPROPRIATE)

ITEM	1. AIR VENT	2. SUPPLY LINE	3. MN SUCTION LINE	4. STRIP LINE	5. OVFL LINE	6. VALVE	7. OTHER
BLANK							
REMOVAL							
SURVEYOR SHOP/INITIAL							

SKETCH (USE ABOVE NOS. FOR LOCATION)

INSPECTED BY (SURVEYOR OR SHOP)	DATE	<input type="checkbox"/> SAT <input type="checkbox"/> UNSAT
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INSPECTED BY (S/F PRINT NAME)	DATE	<input type="checkbox"/> SAT <input type="checkbox"/> UNSAT
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COPY TO: SHIP SUPT, SHIP, SURVEYOR (CONTRACT WORK)	SHIP SUPT, SHIP (IN HOUSE WORK)
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