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July 10, 2018

Jerome Grant  
DEZURIK  
250 RIVERSIDE AVE N  
SARTELL MN 56377  
US

Service Request Type.: BPV-National ACI Central  
Service Request No.: 2300276  
Your Reference No.:  
Registered to.: DEZURIK

Dear Jerome Grant,

Please find enclosed the original response from PEI,NS,NB,NFLD,YK,NWT,NU, registered under the CRN No.: 0C0707.59870YTNR5.

As all jurisdictional fees are handled by the Technical Standards and Safety Authority (TSSA), you do not pay any jurisdictions directly.

Should you have any questions or require further assistance, I will be happy to assist you. For general enquiries, please contact a Customer Service Advisor at 1.877.682.TSSA (8772) or e-mail [customerservices@tssa.org](mailto:customerservices@tssa.org). When contacting TSSA regarding this file, please refer to the Service Request number provided above.

Yours truly,

Tanya Francis  
Administrative Assistant\_ BPV Engineering  
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**UNIFORM STATUTORY DECLARATION FORM FOR THE REGISTRATION OF FITTING DESIGNS**

NEW BRUNSWICK  
NUNAVUT

NOVA SCOTIA  
YUKON

PRINCE EDWARD ISLAND  
NORTHWEST TERRITORIES

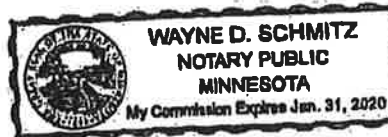
NEWFOUNDLAND AND LABRADOR

MANUFACTURERS NAME: DeZURIK, Inc.	
MANUFACTURERS ADDRESS: 250 Riverside Ave N, Sartell MN 56377	
PLANT LOCATIONS: 250 Riverside Ave N, Sartell MN 56377	
<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 <input checked="" type="checkbox"/> C Valves: all line valves D Expansion joints, flexible connections, and hose assemblies: all types E Strainers, filters, separators, and steam traps 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)	<b>TITLE OF THE STANDARD OF CONSTRUCTION</b>  Various - See Product Design Summaries
<b>SHOW MANUFACTURERS NAME, TRADEMARK, OR LOGO AS IT WILL APPEAR ON THE PRODUCT</b>  	<b>TYPE OF CONSTRUCTION</b> FORGED <input type="checkbox"/> WELDED <input type="checkbox"/> WROUGHT <input type="checkbox"/> CAST <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> DESCRIBE OTHER:
<b>LIST OF SUPPORTING DOCUMENTATION AND IDENTIFICATION OF THE ACTUAL ITEMS TO BE REGISTERED:</b>  See individual product design summaries and verification data.	

**DECLARATION:**

I, Jerome D Grant, P. E. (see note 3) employed by DeZURIK, Inc. 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 TUV 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: *Jerome D Grant*  
 Declared before me at Sartell Minnesota  
 This 13<sup>th</sup> day of April AD 2018  
 Commissioner of Oaths or Notary Public: (sign) *Wayne D Schmitz*  
 (Affix Official seal to the right)



This space for Regulatory Authority use  
 This registration must be revalidated after ten (10) years from the date of acceptance.

CRN: 0C0707.5 REV5  
 FID#: 2708

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.

  
 Date May 18/18  
 C.R.N. 0C0707.58REV5  
 Dwg. as described  
 Signed Yvonne Perry  
1 of 1  
 Part  
