


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: FOSTER MANUFACTURING COMPANY INC.	
Manufacturers Address: 2324 WEST BATTLEFIELD ROAD, SPRINGFIELD, MISSOURI, 65807, USA	
Plant Locations: SAME AS ABOVE	
<p align="center">Category of Fittings to be registered. Circle one Category only</p> <p>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 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 <input checked="" type="radio"/> H Pressure retaining components that do not fall into one of the above categories M Nuclear components: Class 1 <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 <input type="checkbox"/>. (Meeting CNSC or ASME requirements)</p>	<p align="center">Title of the Standard of Construction</p> <p>- ASME B31.1 - ASME B31.3</p>
Show Manufacturers Name, Trademark, or Logo as it will appear on the product	
 AND/OR "FOSTER"	<p align="center">Type of Construction</p> <p>Forged <input type="checkbox"/> Welded <input type="checkbox"/> Wrought <input type="checkbox"/> Cast <input type="checkbox"/> Other <input type="checkbox"/> Describe other:</p>
List of supporting documentation and identification of the actual items to be registered:	
- SCOPE OF CRN, DRAWINGS, CALCULATIONS, REPORTS	

Declaration:

I TOM PREUSCH, PRODUCT ENGINEER (see note 3) employed by FOSTER MANUFACTURING COMPANY 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 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 INTERTEK ISO 9001:2008 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 Springfield, MO
 This 17th day of July AD 2017
 Commissioner of Oaths
 Or Notary Public: (sign) [Signature]
 (Affix Official seal to the right)

CHRISTAL JOYE MOODY
 Notary Public - Notary Seal
 Use this space for the Notary Seal
 Grand County
 My Commission Expires Feb 17, 2020
 Commission #11364180

<p align="center">This space for Regulatory Authority use.</p> <p align="center">This registration must be revalidated after ten (10) years from the date of acceptance.</p> <p>CRN: <u>OH20062.5</u></p> <p>FID#: <u>15653</u></p> <p>Notes:</p> <ol style="list-style-type: none"> All Fittings shall be registered in the name of the Manufacturer. Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation. The Declaration shall be made by the person having full authority and responsibility for the quality of the end product. Quality Control programs shall be resubmitted for validation. <p align="left">11/2016</p>	<p>ACCEPTED</p> <p>PROVINCE OF PRINCE EDWARD ISLAND COMMUNITIES, LAND & ENVIRONMENT</p> <p>CRN. <u>OH 20062.54</u></p> <p>DATE: <u>Aug 3/18</u></p> <p>INSPECTION SERVICES SECTION BOILER/PRESSURE VESSEL BRANCH</p> <p align="right">Sect 1.0 - Fittings Rev.2</p>
---	--


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: FOSTER MANUFACTURING COMPANY INC.	
Manufacturers Address: 2324 WEST BATTLEFIELD ROAD, SPRINGFIELD, MISSOURI, 65807, USA	
Plant Locations: SAME AS ABOVE	
<p>Category of Fittings to be registered. Circle one Category only</p> <p>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 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 <input checked="" type="radio"/> H Pressure retaining components that do not fall into one of the above categories M Nuclear components: Class 1 <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 <input type="checkbox"/> (Meeting CNSC or ASME requirements)</p>	<p>Title of the Standard of Construction</p> <p>- ASME B31.1 - ASME B31.3</p>
<p>Show Manufacturers Name, Trademark, or Logo as it will appear on the product</p>  <p>AND/OR "FOSTER"</p>	<p>Type of Construction</p> <p>Forged <input type="checkbox"/> Welded <input type="checkbox"/> Wrought <input type="checkbox"/> Cast <input type="checkbox"/> Other <input type="checkbox"/> Describe other:</p>
<p>List of supporting documentation and identification of the actual items to be registered:</p> <p>- SCOPE OF CRN, DRAWINGS, CALCULATIONS, REPORTS</p>	

Declaration:

I, TOM PREUSCH, PRODUCT ENGINEER (see note 3) employed by FOSTER MANUFACTURING COMPANY 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 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 INTERTEK ISO 9001:2008 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: [Handwritten Signature]

Declared before me at Springfield, MO

This 17th day of July AD 2017

Commissioner of Oaths

Or Notary Public: (sign) [Handwritten Signature]

(Affix Official seal to the right)

Use this space for the Official Seal

CHRYSTAL JOYE MOODY
 Notary Public - Notary Seal
 State of Missouri
 Greene County
 My Commission Expires Feb 17, 2020
 Commission #11384180

This space for Regulatory Authority use.

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

CRN: OH20062.5

FID#: 15653

Notes:

- All Fittings shall be registered in the name of the Manufacturer.
- Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation.
- The Declaration shall be made by the person having full authority and responsibility for the quality of the end product.
- Quality Control programs shall be resubmitted for validation.

11/2016

BOILER & PRESSURE VESSEL
 NOVA SCOTIA
 Date Aug. 3/18
 C.R.N. OH20062.58
 Dwg. as described
 Signed Yvonne Perry
 1 of 1
 Part
 ACT & REGULATIONS

Sect 1.0 - Fittings Rev.2


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: FOSTER MANUFACTURING COMPANY INC.	
Manufacturers Address: 2324 WEST BATTLEFIELD ROAD, SPRINGFIELD, MISSOURI, 65807, USA	
Plant Locations: SAME AS ABOVE	
<p align="center">Category of Fittings to be registered. Circle one Category only</p> <p>A Pipe fittings, including couplings, tees, elbows, Ys, plugs, unions, pipe caps, or reducers</p> <p>B Flanges: all flanges</p> <p>C Valves: all line valves</p> <p>D Expansion joints, flexible connections, and hose assemblies: all types</p> <p>E Strainers, filters, separators, and steam traps</p> <p>F Measuring devices, including pressure gauges, level gauges, sight glasses, levels, or pressure transmitters</p> <p>G Certified capacity-rated pressure relief devices acceptable as primary over pressure protection on boilers, pressure vessels, piping and fusible plugs</p> <p><input checked="" type="radio"/> H Pressure retaining components that do not fall into one of the above categories</p> <p>N Nuclear components: Class 1 <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 <input type="checkbox"/> , (Meeting CNSC or ASME requirements)</p>	<p align="center">Title of the Standard of Construction</p> <p>- ASME B31.1</p> <p>- ASME B31.3</p>
<p>Show Manufacturers Name, Trademark, or Logo as it will appear on the product</p> <div style="text-align: center;">  <p>AND/OR "FOSTER"</p> </div>	<p align="center">Type of Construction</p> <p>Forged <input type="checkbox"/> Welded <input type="checkbox"/> Wrought <input type="checkbox"/></p> <p>Cast <input type="checkbox"/> Other <input type="checkbox"/></p> <p>Describe other:</p>
<p>List of supporting documentation and identification of the actual items to be registered:</p> <p>- SCOPE OF CRN, DRAWINGS, CALCULATIONS, REPORTS</p>	

Declaration:

I TOM PREUSCH, PRODUCT ENGINEER (see note 3) employed by FOSTER MANUFACTURING COMPANY 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 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 INTERTEK ISO 9001:2008 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 Springfield, MO
 This 17th day of July AD 2017
 Commissioner of Oaths
 Or Notary Public: (sign) Chrystal Moody
 (Affix Official seal to the right)

CHRYSTAL JOYE MOODY
 Notary Public - Notary Seal
 Use this space for the Official Seal
 Greene County
 My Commission Expires Feb 17, 2020
 Commission #11364180

<p align="center">This space for Regulatory Authority This registration must be revalidated after ten (10) years from the date of acceptance.</p> <p>CRN: <u>OH20062.5</u></p> <p>FID#: <u>15653</u></p> <p>Notes:</p> <ol style="list-style-type: none"> All Fittings shall be registered in the name of the Manufacturer. Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation. The Declaration shall be made by the person having full authority and responsibility for the quality of the end product. Quality Control programs shall be resubmitted for validation. <p>11/2016</p>	<p align="center">New Brunswick DEPT OF PUBLIC SAFETY BOILER & PRESSURE VESSEL ACT</p> <p align="center">REGISTRATION ONLY</p> <p>CRN <u>OH20062.57</u></p> <p>EXAMINER: <u>[Signature]</u> for CHIEF FILE INSPECTOR</p> <p>DATE <u>8/3/2018</u></p> <p align="right">Sect 1.0 - Fittings Rev.2</p>
--	--

BLRs PVs

FITTINGS COMPONENTS


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: FOSTER MANUFACTURING COMPANY INC.	
Manufacturers Address: 2324 WEST BATTLEFIELD ROAD, SPRINGFIELD, MISSOURI, 65807, USA	
Plant Locations: SAME AS ABOVE	
<p align="center">Category of Fittings to be registered. Circle one Category only</p> <p>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 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 <input checked="" type="radio"/> 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 CNSC or ASME requirements)</p>	<p align="center">Title of the Standard of Construction</p> <p>- ASME B31.1 - ASME B31.3</p>
Show Manufacturers Name, Trademark, or Logo as it will appear on the product:	
	<p align="center">AND/OR "FOSTER"</p> <p align="center">Type of Construction</p> <p>Forged <input type="checkbox"/> Welded <input type="checkbox"/> Wrought <input type="checkbox"/> Cast <input type="checkbox"/> Other <input type="checkbox"/> Describe other:</p>
List of supporting documentation and identification of the actual items to be registered:	
- SCOPE OF CRN, DRAWINGS, CALCULATIONS, REPORTS	

Declaration:

I, TOM FREUSCH, PRODUCT ENGINEER (see note 3) employed by FOSTER MANUFACTURING COMPANY 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 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 INTERTEK ISO 9001:2008 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 Springfield, MO

This 17th day of July AD 2017

Commissioner of Oaths

Or Notary Public: (sign) [Signature]

(Affix Official seal to the right)



This space for Regulatory Authority use.	
<p>CRN: <u>OH20062.5</u></p> <p>FID#: <u>15653</u></p> <p>Notes:</p> <ol style="list-style-type: none"> All Fittings shall be registered in the name of the Manufacturer Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation. The Declaration shall be made by the person having full authority and responsibility for the quality of the end product. Quality Control programs shall be resubmitted for validation <p>11/2016</p>	<p align="center">This registration must be revalidated after ten (10) years from the date of acceptance.</p> <p align="center">Newfoundland Labrador Service NL</p> <p>Registered <u>OH20062.50</u> Date <u>17 AUG 2018</u> Engineering and Inspection Services Registered by <u>[Signature]</u></p> <p align="center">UNDER THE AUTHORITY OF THE PUBLIC SAFETY ACT AND THE BOILER, PRESSURE VESSEL AND COMPRESSED GAS REGULATIONS</p> <p align="right">Sect 1.0 - Fittings Rev.2</p>


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: FOSTER MANUFACTURING COMPANY INC.	
Manufacturers Address: 2324 WEST BATTLEFIELD ROAD, SPRINGFIELD, MISSOURI, 65807, USA	
Plant Locations: SAME AS ABOVE	
<p align="center">Category of Fittings to be registered. Circle one Category only</p> <p>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 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 <input checked="" type="radio"/> 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 CNSC or ASME requirements)</p>	<p align="center">Title of the Standard of Construction</p> <p>- ASME B31.1 - ASME B31.3</p>
Show Manufacturers Name, Trademark, or Logo as it will appear on the product	
 AND/OR "FOSTER"	<p align="center">Type of Construction</p> <p>Forged <input type="checkbox"/> Welded <input type="checkbox"/> Wrought <input type="checkbox"/> Cast <input type="checkbox"/> Other <input type="checkbox"/> Describe other:</p>
List of supporting documentation and identification of the actual items to be registered:	
- SCOPE OF CRN, DRAWINGS, CALCULATIONS, REPORTS	

Declaration:

I TOM PREUSCH, PRODUCT ENGINEER (see note 3) employed by FOSTER MANUFACTURING COMPANY 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 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 INTERTEK ISO 9001:2008 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 Springfield, MO
 This 17th day of July AD 2017
 Commissioner of Oaths
 Or Notary Public: (sign) [Signature]
 (Affix Official seal to the right)


CHRYSTAL JOYE MOODY
 Notary Public - Notary Seal
 State of Missouri
 Greene County
 My Commission Expires Feb 17, 2020
 Commission #11364180

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

CRN: OH20062.5
 FID#: 15653

Notes:

- All Fittings shall be registered in the name of the Manufacturer.
- Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation.
- The Declaration shall be made by the person having full authority and responsibility for the quality of the end product.
- Quality Control programs shall be resubmitted for validation.



Sect 1.0 - Fittings Rev.2

11/2016


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: FOSTER MANUFACTURING COMPANY INC.	
Manufacturers Address: 2324 WEST BATTLEFIELD ROAD, SPRINGFIELD, MISSOURI, 65807, USA	
Plant Locations: SAME AS ABOVE	
<p align="center">Category of Fittings to be registered. Circle one Category only</p> <p>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 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 <input checked="" type="checkbox"/> 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 CNSC or ASME requirements)</p>	<p align="center">Title of the Standard of Construction</p> <p>- ASME B31.1 - ASME B31.3</p>
<p>Show Manufacturers Name, Trademark, or Logo as it will appear on the product</p> <div style="display: flex; align-items: center;">  <div style="margin-left: 10px;">AND/OR "FOSTER"</div> </div>	<p align="center">Type of Construction</p> <p>Forged <input type="checkbox"/> Welded <input type="checkbox"/> Wrought <input type="checkbox"/> Cast <input type="checkbox"/> Other <input type="checkbox"/> Describe other:</p>
<p>List of supporting documentation and identification of the actual items to be registered:</p> <p>- SCOPE OF CRN, DRAWINGS, CALCULATIONS, REPORTS</p>	

Declaration:

I TOM PREUSCH, PRODUCT ENGINEER (see note 3) employed by FOSTER MANUFACTURING COMPANY 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 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 INTERTEK ISO 9001:2008 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 Springfield, MO
 This 17th day of July AD 2017
 Commissioner of Oaths
 Or Notary Public: (sign) Chrystal Moody
 (Affix Official seal to the right)

CHRISTAL JOYE MOODY
 Notary Public - Notary Seal
 STATE OF MISSOURI
 Greene County
 My Commission Expires Feb 17, 2020
 Commission #11364180

<p>CRN: <u>0H20062.5</u></p> <p>FID#: <u>15653</u></p> <p>Notes:</p> <ol style="list-style-type: none"> All Fittings shall be registered in the name of the Manufacturer. Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation. The Declaration shall be made by the person having full authority and responsibility for the quality of the end product. Quality Control programs shall be resubmitted for validation. <p>11/2016</p>	<p align="center">This space for Regulatory Authority use. This registration must be revalidated after ten (10) years from the date of acceptance.</p> <p align="center">Northwest Territories REGISTERED UNDER THE AUTHORITY OF THE BOILER AND PRESSURE VESSEL ACT. C.R.N. <u>0H20062.5</u> SIGNED <u>[Signature]</u> DATE <u>Aug 17 2017</u></p> <p align="right">1/63-00</p> <p align="right">1.0 - Fittings Rev.2</p>
--	--


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: FOSTER MANUFACTURING COMPANY INC.	
Manufacturers Address: 2324 WEST BATTLEFIELD ROAD, SPRINGFIELD, MISSOURI, 65807, USA	
Plant Locations: SAME AS ABOVE	
<p align="center">Category of Fittings to be registered. Circle one Category only</p> <p>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 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 <input checked="" type="radio"/> 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 CNSC or ASME requirements)</p>	<p align="center">Title of the Standard of Construction</p> <p>- ASME B31.1 - ASME B31.3</p>
<p>Show Manufacturers Name, Trademark, or Logo as it will appear on the product</p> <div style="text-align: center;">  <p>AND/OR "FOSTER"</p> </div>	<p align="center">Type of Construction</p> <p>Forged <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Wrought <input type="checkbox"/> Cast <input type="checkbox"/> Other <input type="checkbox"/> Describe other:</p>
<p>List of supporting documentation and identification of the actual items to be registered:</p> <p>- SCOPE OF CRN, DRAWINGS, CALCULATIONS, REPORTS</p>	

Declaration:

I TOM PREUSCH, PRODUCT ENGINEER (see note 3) employed by FOSTER MANUFACTURING COMPANY 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 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 INTERTEK ISO 9001:2008 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 Springfield, MO
 This 17th day of July AD 2017
 Commissioner of Oaths
 Or Notary Public: (sign) [Signature]
 (Affix Official seal to the right)

CRYSTAL JOYE MOODY
 Notary Public - Notary Seal
 Use this space for the COMMISSIONER'S Seal
 Greene County
 My Commission Expires Feb 17, 2020
 Commission #11384180

<p align="center">This space for Regulatory Authority Use This registration must be revalidated after ten (10) years from the date of acceptance.</p> <p>CRN: <u>0H20062.5</u></p> <p>FID#: <u>15653</u></p> <p>Notes:</p> <ol style="list-style-type: none"> All Fittings shall be registered in the name of the Manufacturer. Each Category shall be supported with two Statutory Declaration forms and one copy of supporting documentation. The Declaration shall be made by the person having full authority and responsibility for the quality of the end product. Quality Control programs shall be resubmitted for validation. <p align="left">11/2016</p>	<p align="center">NUNAVUT</p> <p align="center">Boilers and Pressure Vessels Act</p> <p align="center">REGISTERED</p> <p>CRN <u>0H20062.5N</u></p> <p>Date <u>Aug 10, 2018</u></p> <p>Signed <u>[Signature]</u> Chief Inspector</p> <p align="right">Sect 1.0 - Fittings Rev.2</p> <p align="center">Territorial Registration Fee</p>
--	---