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August 16, 2022

PRESSURE VESSEL ENGINEERING LTD.
120 RANDALL DR SUITE B
WATERLOO ON N2V 1C6

Workorder Type: Registration - Fitting(Conventional)
Workorder No: 8064586
Your Reference No.: PVE-16652
Registered to: HERTECANT FLANGES NV

Dear MARY McCLELLAND,

Technical Standards and Safety Authority (TSSA) is pleased to inform you that your submission has been reviewed and registered as follows:

CRN : 0B15769.5R1
Main Design No.: Renewal of CRN 0B15769.5
Expiry Date: Aug 16, 2032

Please be advised that a valid quality control system must be maintained for the fitting registration to remain valid until the expiry date.

R1: Renewal of CRN. Please refer to Scope for detail of registration.

The stamped copy of the approved registration and the invoice are mailed separately (There will be no hard copies for electronic submissions). Should you have any questions or require further assistance, please contact a Customer Service Advisor at 1.877.682.TSSA (8772) or e-mail customerservices@tssa.org. We will be happy to assist you. When contacting TSSA regarding this file, please refer to the Service Request number provided above.

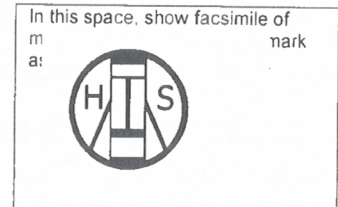
Yours truly,

Norman Ngai

Norman Ngai P. Eng. Mechanical Engineer
Engineer, BPV
Tel. : +1 416-734-3557
Email : NNgai@tssa.org

**STATUTORY DECLARATION
Registration of Fittings**
Single or Multiple Fitting Designs within one Fitting Category

I, Mark Dewachter, Managing Director
(name of applicant) (position title) (must be in a position of authority)
of Hertecant Flanges N.V.
(name of manufacturer)
located at Lossing 22, 2260 Heultje-Westerlo, Belgium
(plant address)



do solemnly declare that the fittings listed hereunder, which are subject to the Safety Codes Act (select only one)

- ☒ comply with the requirements of ASME B16.5/ 16.47 which specifies the dimensions, materials of construction, pressure/temperature ratings and identification marking of the fittings, or
(title of recognized North American Standard)
- ☒ are not covered by the provisions of a recognized North American standard and are therefore manufactured to comply with customers specifications as supported by the
(title of code of construction or other applicable document)
attached data which identifies the dimensions, materials of construction, pressure/temperature ratings and the basis for such ratings, and the identification marking of the fittings.

I further declare that the manufacture of these fittings is controlled by a quality control program which has been verified as described in the below Table as being suitable for the manufacturing of these fittings to the stated standard, regulation, code, guideline or other applicable document. The fittings covered by the declaration for which I seek registration are as provided in the Supplementary Sheet(s) attached.

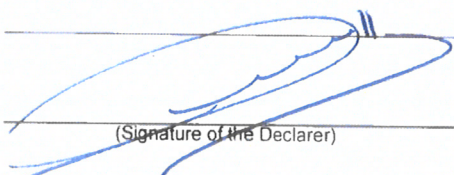
Quality Program Verification and Manufacturing Sites

A copy of the Quality Certificate from each manufacturing site must be included

Item #	Product Description, Model or Series	Quality Program	Scope of Certification	Expiry Date	Verifying Organization	Location(s) Plant Name and address
1.	Flanges Cat.B	ISO	Manufacture of steel forgings	2023-11-29	DNV	Lossing 22, 2260 Heultje-Westerlo, Belgium
2.						

In support of this application, the following information, calculations and/or test data are attached:

See Scope document 16652scp-1 R0

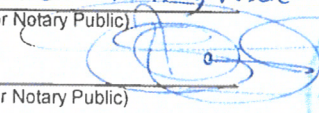

(Signature of the Declarer)

10-11-2021
(Date)

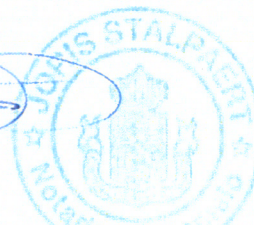
DECLARED before me at TREMELD in the KINGDOM of BELGIUM
(city) (province, territory, or state)

this 10th day of NOV, 2021
(Month) (Year)

(print) JOE'S STALPAERT NOTARY PUBLIC
(a Commissioner of Oaths or Notary Public)

(sign) 
(a Commissioner of Oaths or Notary Public)

10/11/2021
(expiry date (mm/dd/yy))



Commissioner of Oaths / Notary Public in and for: TREMELD (BELGIUM)
(province, territory, or state)

For ABSA Office Use Only:

NOTES: _____

To the best of my knowledge and belief, the application meets the requirements of the Safety Codes Act and CSA Standard B51, Part 1, Clause 4.2, and is accepted for registration in Category _____

CRN: _____

Registered Date: _____

Expiry Date: _____

Signature: _____
(Signature of the Administrator/SCO)

The information you provide is necessary only for the administration of the programs as required by the Alberta Safety Codes Act and Regulations in the Pressure Equipment Discipline

2022-04903

ABSA

SAFETY CODES ACT - PROVINCE OF ALBERTA

ACCEPTED: 0B15769.52

See acceptance letter for conditions of registration.

Date: 2022-09-13

By: 
MILLA GRYNCHUK, P. Eng
DOP: D00005217

This stamp and signature have been affixed electronically to this registered design as required by Section 20(1) of the Pressure Equipment Safety Regulation, in accordance with the Electronic Transactions Act.