

QUALIFICATION TEST RECORD

No.	1595	Manufacture.	יעקב פורת	
Name: יהודה פורת		I.D. No. 27954262		
Joint Welding Procedure		Butt		<input checked="" type="checkbox"/> Welder <input type="checkbox"/> Welding Operator
WPS No.		1059		
TEST WELD				
Base Metal Description		4130		Group No. IB
Welding Process		GTAW		<input checked="" type="checkbox"/> Single Weld <input type="checkbox"/> Double Weld
Current		AC <input type="checkbox"/> DCEN <input type="checkbox"/> DCEP <input checked="" type="checkbox"/>		Backing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N.A
Vertical		Down <input type="checkbox"/> Up <input type="checkbox"/>		Penetration <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Partial
Filler metal or electrode classification		ER4130		F No. 6 Gas Ar. Backing Gas NO
		Position		Dimension, mm
Sheet Groove	<input checked="" type="checkbox"/> 1G <input type="checkbox"/> 2G <input type="checkbox"/> 3G <input type="checkbox"/> 4G			t 1.6
Tube Groove	<input type="checkbox"/> 1G <input type="checkbox"/> 2G <input type="checkbox"/> 5G <input type="checkbox"/> 6G	OD		t
Sheet Fillet	<input type="checkbox"/> 1F <input type="checkbox"/> 2F <input type="checkbox"/> 3F <input type="checkbox"/> 4F			t
Tube Fillet	<input type="checkbox"/> 1F <input type="checkbox"/> 2F <input type="checkbox"/> 4F <input type="checkbox"/> 5F	OD		t
TEST RESULTS				
Visual	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail			
Radiographic	<input type="checkbox"/> N/A <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail			
Metallographic	<input checked="" type="checkbox"/> N/A <input type="checkbox"/> Pass <input type="checkbox"/> Fail			
Bend	<input checked="" type="checkbox"/> N/A <input type="checkbox"/> Pass <input type="checkbox"/> Fail			
Penetrant	<input checked="" type="checkbox"/> N/A <input type="checkbox"/> Pass <input type="checkbox"/> Fail			
QUALIFIED				
Base Metal Group No.		IA, IB		<input checked="" type="checkbox"/> Single Weld <input checked="" type="checkbox"/> Double Weld
Current		AC <input type="checkbox"/> DCEN <input type="checkbox"/> DCEP <input checked="" type="checkbox"/>		Backing <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Vertical		Down <input type="checkbox"/> Up <input type="checkbox"/>		Penetration <input checked="" type="checkbox"/> Complete <input checked="" type="checkbox"/> Partial
		Position		t, mm O.D."
		Min	Max	Min Max
Sheet Groove	<input checked="" type="checkbox"/> 1G <input type="checkbox"/> 2G <input type="checkbox"/> 3G <input type="checkbox"/> 4G	1.07	6.4	--- ---
Tube Groove	<input checked="" type="checkbox"/> 1G <input type="checkbox"/> 2G <input type="checkbox"/> 5G <input type="checkbox"/> 6G	1.07	6.4	--- ---
Sheet Fillet	<input type="checkbox"/> 1F <input type="checkbox"/> 2F <input type="checkbox"/> 3F <input type="checkbox"/> 4F	---	---	---
Tube Fillet	<input type="checkbox"/> 1F <input type="checkbox"/> 2F <input type="checkbox"/> 4F <input type="checkbox"/> 5F	---	---	---
The above-named individual is qualified in accordance with AWS D17.1 within the above limits for the welding process used for this test weld.				
Original certification date:		18/09/2007		Signed by <u>Zvika Itzkovich</u> ICWI 10025
Current certification date:		18/09/2025		
Expiration Date:		18/09/2027		

