

Inspector Information Questionnaire

Please complete this form in its entirety and return to BCD ASAP.

| | | | |
|-------------|--|----------------|--|
| Name: | | Phone: | |
| Address: | | Cell: | |
| City/State: | | Date of Birth: | |
| Zip: | | Spouse Name: | |
| Email: | | Spouse Cell: | |
| DL No.: | | | |

Experience Level

* Experience Level Definitions:

Level 1 = No experience with this equipment

Level 2 = Familiar (e.g., 1 or 2 jobs per year)

Level 3 = Somewhat experienced (e.g., 1 job every 2 or 3 months)

Level 4 = Experienced, maintain active orders year round

Level 5 = Extensive experience, primary area of expertise

| Equipment | Experience *1 ~ 5 | Vendors Inspected (list primary vendors visited for each type of equipment. Text fields will expand as needed) |
|---------------------------|----------------------|--|
| Pressure Vessels | | |
| Columns | | |
| Towers | | |
| Clad vessels | | |
| Alloy vessels | | |
| Heat Exchangers | | |
| Fin Fan Coolers | | |
| Heaters | | |
| Boilers | | |
| Centrifugal Pumps | | |
| Reciprocating Pumps | | |
| Diaphragm Pumps | | |
| Screw Pumps | | |
| Centrifugal Compressors | | |
| Reciprocating Compressors | | |
| Screw Compressors | | |

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| | | |
|---------------------------|--|--|
| Diaphragm Compressors | | |
| API Lube Oil Systems | | |
| Turbines – Gas | | |
| Turbines – Steam | | |
| Power Recovery Turbines | | |
| Turbo Expanders | | |
| Motors < 200HP | | |
| Motors > 200HP | | |
| Generators | | |
| Transformers | | |
| Switchgear | | |
| Motor Control Centers | | |
| Electric Cables | | |
| Instrument Control Panels | | |
| Minor Instrumentation | | |
| Major Instrumentation | | |
| Pipe valves & Fittings | | |
| Control Valves | | |
| Cranes, Hoists & Winches | | |
| Cathodic Protection | | |
| Paint Systems | | |

| NDE Experience | Level | Perform | Witness | Certification Expires |
|------------------------|--------------|----------------|----------------|------------------------------|
| RT | | | | |
| RT Film Interpretation | | | | |
| MT | | | | |
| PT | | | | |
| UT | | | | |
| VT | | | | |

AWS Certified? _____

Type of Certification _____ Certification No: _____ Expiration: _____

API Certified? _____

Type of Certification _____ Certification No: _____ Expiration: _____

Type of Certification _____ Certification No: _____ Expiration: _____

Type of Certification _____ Certification No: _____ Expiration: _____

Type of Certification _____ Certification No: _____ Expiration: _____

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BCD *Inspection Services LLC*

Inspection & Expediting Services

NACE Certified? _____ **Level** _____

International Experience

Passport No. _____ Expiration Date: _____ Citizenship: _____

Please explain the extent of your international experience (if applicable).

IMPORTANT: Please include the following attachments when returning this form to BCD:

- **Copies of Certifications; NDE, AWS, API, NACE, etc**
- **Copy of Drivers License**
- **Visual Acuity last tested using Jaeger and Ishihara charts**
- **Copy of most recent eye exam**
- **Latest Resume**