PROCEDURE QUALIFICATION RECORD (PQR)

PROCEDURE SPECIFICATION

Material specification _____
Welding process _____
Manual or machine _____
Position of welding _____
Filler metal specification _____
Filler metal classification _____
Weld metal grade* _____
Shielding gas _____ Flow rate _____
Single or multiple pass _____
Single or multiple arc _____
Welding current _____
Welding progression _____
Preheat temperature _____
Postheat treatment _____
Welder's name _____
*Applicable when filler metal has no AWS classification.

VISUAL INSPECTION

Appearance _____
Undercut _____
Piping porosity _____

Test date _____
Witnessed by _____

GROOVE WELD TEST RESULTS

Tensile strength, psi
1. _____
2. _____

Guided-bend tests (2 root-, 2 face-, or 4 side-bend)

Root	Face
1. _____	1. _____
2. _____	2. _____

Radiographic-ultrasonic examination

RT report no. _____
UT report no. _____

FILLET WELD TEST RESULTS

Minimum size multiple pass Macroetch	Maximum size single pass Macroetch
1. _____ 2. _____	1. _____ 3. _____
3. _____	2. _____

All-weld-metal tension test

Tensile strength, psi _____
Yield point/strength, psi _____
Elongation in 2 in, % _____
Laboratory test no. _____

WELDING PROCEDURE

Pass No.	Electrode Size	Electrical Characteristics		Travel Speed	Joint Detail
		Amperes	Volts		

We, the undersigned, certify that the statements in this record are correct and that the test welds were prepared, welded, and tested in accordance with the requirements of AWS D15.1: (_____), *Railroad Welding Specification for Cars and Locomotives*.
(year)

Procedure no. _____
Revision no. _____
Form D-2

Manufacturer or Contractor _____
Authorized by _____
Date _____