

## SCUBA Regulator Check Form

Diver's Name: \_\_\_\_\_

Date: \_\_\_\_\_

Regulator Make and Model: \_\_\_\_\_

Serial Numbers:    first stage \_\_\_\_\_

                                 primary second stage \_\_\_\_\_

                                 alternate second stage \_\_\_\_\_

New \_\_\_\_\_      Receipt \_\_\_\_\_      Used \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Checks: OK

1. Check overall appearance, dry rot, cuts, or nicks \_\_\_\_\_

2. Pressure check first stage to manufacturer specs \_\_\_\_\_  
(no creep, acceptable droop)

3. Intermediate Pressure \_\_\_\_\_ @ \_\_\_\_\_

4. Check for leaks, free flow (first & second stages, hoses) \_\_\_\_\_

5. Check for ease of breathing , purge flow rate \_\_\_\_\_

6. Pressure gauge reads accurately, no leak at hp swivel \_\_\_\_\_

Regulator Passes \_\_\_\_\_      Regulator Fails \_\_\_\_\_

Inspector Signature \_\_\_\_\_

Dive Shop / Facility Stamp:

## Buoyancy Compensator Check Form

Divers Name: \_\_\_\_\_

Date: \_\_\_\_\_

B.C. Make and Model: \_\_\_\_\_

Integrated Alternate Air Source? \_\_\_\_ Functional? \_\_\_\_ (see regulator check form)

Serial number: \_\_\_\_\_

New \_\_\_\_\_ Receipt \_\_\_\_\_ Used \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Checks:

OK

1. Check overall appearance, dry rot, holes, hoses

\_\_\_\_\_

2. Check for leaks

\_\_\_\_\_

3. Check inflator unit for function, no sticking, lube

\_\_\_\_\_

4. Check all dump valves for function

\_\_\_\_\_

5. Check tank strap and buckle for signs of wear and tear

\_\_\_\_\_

Dive Shop / Facility Stamp

## Dive Computer Check Form

**Divers Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Computer Make and Model:** \_\_\_\_\_

**Serial number:** \_\_\_\_\_

**New** \_\_\_\_\_ **Receipt** \_\_\_\_\_ **Used** \_\_\_\_\_

**Battery needs replacing?** \_\_\_\_\_ **Functional?** \_\_\_\_\_

**Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Dive Shop / Facility Stamp:**