



NET CAGE TESTING RECORD

Date of Testing:		Net ID:		Job Order No.:	
Owner of Net (Company):			Name of Company performing testing:		
Name of Contact:		Location of Testing:		Name of Tester:	
Mesh Manufacturer:			Dimensions: (ft) or (m)? _____ x _____ x _____ deep:		
Net Fabricator:			Mesh Size (mid knot to mid knot): (in) (mm)		
Date of Net Fabrication:		Accumulated in-water service time:		Gauge: 210/	
Mesh Manufacturer Breaking Strength (lbs):			Tested: WET or DRY ?		
Required Strength (lbs or kg ?) BELOW WATERLINE:		JUMP:		Test temperature (approx.):	

Breaking Strength (lbs or Kg ?)

	Dipped?	Test 1	Test 2	Test 3	Test 4	Test 5	Average	Pass/ Fail	Initials of Tester
BELOW WATERLINE 1	Yes <input type="checkbox"/> No <input type="checkbox"/>								
BELOW WATERLINE 2	Yes <input type="checkbox"/> No <input type="checkbox"/>								
JUMPNET	Yes <input type="checkbox"/> No <input type="checkbox"/>								

Details of Complete Visual Inspection:

Repairs Completed:

Comments:

Signature of Tester:

