



Ohio Department of Commerce

Division of Industrial Compliance
 Bureau of Operations and Maintenance, Boilers
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John R. Kasich
 Governor

Jacqueline T. Williams
 Director

BOILER DATA REPORT—FIRST INTERNAL INSPECTION

Permit # _____

DATE INSPECTED MO DAY YR		CERT EXP DATE MO YR		MULTI UNIT YES NO		LEAD OR CERT BOILER YES NO		JURISDICTION NUMBER		NAT'L BD NO ___ SERIAL NO ___	
OWNER				NATURE OF BUSINESS				KIND OF INSP INT EXT		CERT. INSP YES NO	
OWNER ADDRESS				OWNER CITY				STATE		ZIP	
USER NAME/ OBJECT LOCATION				LOCATION IN PLANT				COUNTY			
USER ADDRESS				USER CITY				STATE		ZIP	
TYPE ___ FT ___ WT ___ CI ___ ELECTRIC			YEAR BUILT			CERTIFIED BY			YEAR INST.		NEW SEC HAND
OTHER			USE ___ POWER ___ PROCESS ___ STEAM HTG ___ HWH ___ HWS			CODE STAMP		METHOD OF FIRING		FUEL (BOILER)	
STORAGE HEAT EXCHANGE OTHER			PRESSURE THIS INSP.			MAWP		W		BOILER MRVC	
			S				EXPLAIN IF PRESSURE CHANGED				
SAFETY RELIEF VALVES				TOTAL CAPACITY OF SAFETY RELIEF VALVES							
NUMBER		SIZE		SET AT		BTU/HR, LBS/HR, CFM					
IS CONDITION OF OBJECT SUCH THAT CERT.. MAY BE ISSUED? ___ YES ___ NO (IF NO ATTACH CODE VIOLATION REPORT)						HYDRO TEST YES PSI. DATE NO					
SHELL DIAMETER ___ ID		OVERALL LENGTH		TOTAL BOILER HTG SURFACE		CAST IRON BOILER				SECTIONS	
NO. OD				SQ FT		LENGTH.		WIDTH		HEIGHT NO.	

OTHER CONDITIONS & CONTRACTOR INFORMATION

STATE NUMBER OF BOILER BEING REPLACED: _____

INSPECTOR NAME (PRINT)		NAME OF COMPANY REPRESENTATIVE		PHONE NO.	
INSPECTOR SIGNATURE		ID NO	EMPLOYED BY		ID NO

YOU MUST FILL IN EVERY BLOCK, IF IT IS NOT APPLICABLE THEN YOU MUST FILL IN THE BLOCK WITH-----
 DIC4306 (01-05-2005)