Ohio Department of Commerce

Division of Industrial Compliance
Bureau of Operations and Maintenance, Boilers
6606 Tussing Road ⊙ P.O. Box 4009
Reynoldsburg, OH 43068-9009
(614) 644-2236 FAX (614) 644-2428
www.com.state.oh.us

John Kasich
Governor

Jacqueline T. Williams
Director

APPLICATION FOR REGISTRATION, BOILER CONTRACTORS
INSTALLATION, MAJOR REPAIRS OR MODIFICATIONS
PLEASE TYPE OR PRINT

Authority: OAC 4101:4 Boiler Code Completion: Mandatory Penalty: Denial, Suspension or Revocation of License	Filing Fee $50.00 Make check payable to: Treasurer State of Ohio

Name of Applicant_____

Address_____

City_____St_____Zip_____

Phone Number_____

Name of Business_____

Address_____

City_____St_____Zip_____

Phone Number_____

Scope of work desiring to perform:

Do you have the ASME Codes for the type of work you wish to perform?	Yes_____	No_____
Do you have the NBIC concerning repairs for boilers?	Yes_____	No_____
Do you have the Ohio rules and regulations for boilers and unfired pressure vessels?	Yes_____	No_____
Do you have a written QC program as outlined in NBIC to control the welded Repair process of boilers?	Yes_____	No_____
Do you have current qualified welding procedures and welders performance Procedure papers?	Yes_____	No_____

ADDITIONAL REMARKS THAT WOULD QUALIFY YOU FOR THIS REGISTRATION:_____
_____.

WORK EXPERIENCE- LIST WORK PERFORMED ON (3) SEPARATE BOILERS

Company_____ Address_____ City_____St_____Zip_____ Type of Boiler_____Max Boiler Press_____	Work Performed: Installation or maintenance of burner or Refractory "NOT ACCEPTABLE"
Company_____ Address_____ City_____St_____Zip_____ Type of Boiler_____Max Boiler Press_____	Work Performed: Installation or maintenance of burner or Refractory "NOT ACCEPTABLE"
Company_____ Address_____ City_____St_____Zip_____ Type of Boiler_____Max Boiler Press_____	Work Performed: Installation or maintenance of burner or Refractory "NOT ACCEPTABLE"

I certify that the information given is true to the best of my knowledge. I understand that falsification of any statement in this application is cause for rejection or revocation of license, if issued.

Signature_____ Date_____