



MECHANICAL BOILER INSPECTION REPORT

- 1. Name of Apartment Complex: _____
- 2. Address of Apartment Complex: _____
- 3. Name of owner: _____ Address: _____
- 4. Age of Boiler at Time of Inspection: _____
- 5. Manufacturer of Boiler: _____
- 6. Location of Boiler: Building Number _____
- 7. Boiler Use: Heat _____ Hot Water _____ Both _____
- 8. Method of Firing: Oil _____ Gas _____ Electric _____
- 9. Rated Heat Input: Gas BTU _____ Oil _____ Electric _____
- 10. Fuel Shut Off: Yes _____ No _____
- 11. Fire Protection: Extinguishers _____ Sprinkler _____ Other _____
- 12. Temperature Control: High _____ Low _____
- 13. Safety Shut Off Valves or Switches: Yes _____ No _____
- 14. Safety Relief Valve in Proper Working Order: Yes _____ No _____
- 15. Type of Ignition: Spark _____ Gas _____ Pilot _____ Other _____
- 16. Type of Alarm Shut Off: Fuel _____ Air Combustion _____ Power _____
Flame _____ Other _____
- 17: Condition of: Check Valves _____ Pressure Valves _____ Fuel _____
Damper _____ Vent _____ Circulating Pumps _____
Circulating System _____ Gauges _____ Boiler Tubes _____
- 18. Public Water System Protected by Approved Back-Flow Device: Yes _____ No _____
- 19. Approved for Current Heating Season: Inspector _____
Date _____ Representing _____
- 20. Name (s) of Other Inspection Agencies: (State, Fire, Underwriters, etc...) _____

- 21. Signature of Owner/ Agent _____ Date _____

Comments: _____

