

Boiler Condition Report

Boiler and Pressure Equipment
 Ph: 902-424-3200 Fax: 902-428-8770

Scan & Send to: boilers@novascotia.ca

(BPE Regulations, Maintenance and Inspection Section 28 (2) (b))

(This condition report is only to be used for boiler output > 150 kW (507,104 Btu/Hr) and ≤ 15 psi steam or ≤ 30 psi hot water)

Owner Name: _____

Site Name: _____

Address: _____

Boiler Information

Oil or Gas

NSIN (DOL Tag Number): _____

Serial Number: _____

Year Built: _____

Boiler Name Plate Minimum Relief Valve Capacity: _____
 (MBH, Btu/hr or Lb/hr)

Relief Valve Information

Set Pressure: _____

Capacity: _____

Manufacturer: _____

Size: _____

Checklist / Function Test

Acceptable

Not Checked

LWCO Manual Reset:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>
LWCO or Flow Switch Tested:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>
Fire Eye:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>
High Limit Cutout:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>
Safety Valve Lifted:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>
Safety Valve ≥ Boiler Capacity:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>
Boiler Room Condition:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>
Certified (CSA, ULC, etc.):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>

Notes:

Maintenance Contractor Company Name: _____

Technician (print name): _____

Technician Signature: _____ Date: _____

Gas Tech. Licence #: _____

Oil Burner Mechanic Red Seal #: _____

Office Use Only

Reviewed By: _____
 (BPE Inspector Signature)

NS#: _____

Acceptable: Yes No

Date: _____