LOCATION OF BOILER/PRESSURE VESSEL

|  |  |  |
| --- | --- | --- |
| Name of Location: | | |
| Address: | | |
| City: | Zip Code: | County: |

PRIMARY CONTACT:

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | | Phone: | |
| Address: | | Email: | |
| City: | Zip Code: | | County: |

PERSON SUBMITTING:

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | | Phone: | |
| Company: | | Fax: | |
| Address: | | Email: | |
| City: | Zip Code: | | County: |

MARYLAND SERIAL NUMBERS OF OBJECTS TO BE INSPECTED:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

TYPE OF INSPECTION REQUESTED:

NEW INSTALLATION  ANTIQUE

CERTIFICATE INTERNAL  MODEL

CERTIFICATE EXTERNAL  COMPLAINT

REINSPECTION TO CLEAR VIOLATION  OTHER

|  |  |
| --- | --- |
| Inspection Date Requested: | |
| Inspection Date Scheduled: | Confirmed By: |

Telephone Number: (410) 767-2330 • Fax Number: (410) 333-7827  
E-mail: [boiler.safety@maryland.gov](mailto:boiler.safety@maryland.gov)

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