

KANSAS ANTIQUE ENGINE SHOW
SAFETY ASSOCIATION, INC.

BOILER -- REPORT OF INSPECTION

1	DATE INSPECTED	KAESSA NO.	STATE OR CITY NO.	NATL BOARD OR STANDARD AND NO.	MANUFACTURER'S OR SHOP NO.
2	USER - OWNER (If user is not the owner, give the names and addresses of both user and owner. If ownership has changed, give name on posted certificate)				NATURE OF BUSINESS (Store, laundry, etc.)
3	ADDRESS	(No.) (Street)	(City)	(County)	(State) (Zip)
4	LOCATION	(No.) (Street)	(City)	(County)	(State) (Zip)
5	KIND OF INSPECTION <input type="checkbox"/> INT <input type="checkbox"/> EXT	CERTIFICATE INSP. <input type="checkbox"/> YES <input type="checkbox"/> NO	TYPE OF OBJECT (H.T., V.T., W.T., C.T., Tank, Kettle, etc.)		MADE BY
6	FUEL USED (Coal, Oil, Gas, Pulv., etc.) (Note change, if any)			METHOD OF FIRING (Hand, Stoker, Automatic Burner, etc.)	
7	USED FOR (Exhibition, Power, Heat Process, etc.)		PRESSURE GAGE TESTED <input type="checkbox"/> YES <input type="checkbox"/> NO		HYDRO. TEST APPLIED <input type="checkbox"/> YES _____ psi. <input type="checkbox"/> NO
8	PRESSURE ALLOWED (This inspection) psig	(Previous inspection) psig	EXPLAIN IF PRESSURE CHANGES		FACTOR OF SAFETY
9	CURRENT CERTIFICATE POSTED <input type="checkbox"/> YES <input type="checkbox"/> NO	IS CONDITION OF OBJECT SUCH THAT CERTIFICATE MAY BE ISSUED (Explain) <input type="checkbox"/> YES <input type="checkbox"/> NO			SAFETY VALVE SET AT psig
	HEATING SURFACE sq ft	STEAM GENERATION lb/hr	BOILER HORSEPOWER		SAFETY VALVE CAP. lb/hr

10 CONDITIONS: With respect to the internal surfaces, describe and state location of any scale, oil or other deposits. Give location and extent of any corrosion and state whether active or inactive. State location and extent of any erosion, grooving, bulging, warping, cracking or similar condition. Report on any defective rivets, bowed, loose or broken stays. State condition of all tubes, tube ends, coils, nipples, etc. Describe any adverse conditions with respect to pressure gage, water column, gage glass, gage cocks, safety valves, etc. Report condition of setting, linings, baffles, supports, etc. Describe any major changes or repairs made since last inspection.

NEXT ULTRASONIC INSPECTION DUE:

11 REQUIREMENTS (List code violations and repairs)*

12 NAME AND TITLE OF PERSON TO WHOM REQUIREMENTS WERE EXPLAINED

I hereby certify that this is a true report as a result of my inspection:

SIGNATURE OF INSPECTOR

In my best judgement this boiler is in safe condition and inspector shall be held faultless.

State Commission # _____

Commission Expires

*The repairs indicated on this report are necessary to put your boiler in a safe operating condition. Please fill out this report, giving the work done on the boiler. If any patching is done, give size of patch, size of rivets, pitch of rivets and thickness of plate used. If new stays are applied, give size of the stay that is used. Give a list of all new material that is used. WELDING ON A BOILER shall be in accordance with recommendations of the National Board of Boiler and Pressure Vessel Inspectors for repair of power boilers.

Kansas Antique Engine Show Safety Association, Inc.

Boiler Inspection Certificate

This Boiler has be inspected in accordance with the
Boiler Safety Act of Kansas

STATE and KAESSA Boiler No.

Pressure Allowed psig

Expiration Date

Inspected By

Commission Expires