

STATE OF TENNESSEE

BOILER OR PRESSURE VESSEL ACCIDENT REPORT

STATE NO. TENN. _____

1) Name of User _____

2) Type of boiler or vessel _____ A.S.M.E. Symbol _____ Date of Accident _____
(W.T. boiler, S.M. boiler, air tank, heat exch., etc.) (S,H,U, etc.)

3) Type accident _____ Location of Accident _____
(Explosion pressure parts, furnace explosion, dry-fired, etc.) (City & State)

4) Type of business where used _____ Used for _____
(Apartment, cannery, school, dry clnrs., sawmill, etc.) (Power, Process, Hot Wtr. Htg., etc.)

5) Manufacturer _____ Mfgs. Serial No. _____ National Board No. _____

6) M.A.W.P. _____ Type fuel or source of pressure _____ Automatic operation? _____
(Gas, Coal, Electric, Air Comp., etc.)

7) Safety valve installed? _____ Set pressure _____ A.S.M.E.-NB Rated _____ Relieving Capacity _____

8) Date of last inspection _____ Inspection Cert. approved? _____ Expiration Date _____

9) Number of Person Killed _____ Number of persons injured _____ Approx. property damage _____

10) Disposition of boiler or vessel (if known) - Repaired _____ Replaced _____ Scrapped _____

11) Briefly describe apparent cause of accident _____

Insurance Company _____

Submitted by _____

Located _____