



**DIVISION OF STATE FIRE MARSHAL
BUREAU OF FIRE PREVENTION
BOILER SAFETY PROGRAM**

DEC 04 2013

**Boiler-Fired Pressure Vessel
REPORT OF INSPECTION**

This inspection is intended for your safety and the safety of the citizens of Florida. Your cooperation is greatly appreciated.

DATE INSPECTED 11/19/2013	CERT EXP DATE	CERT POSTED <input checked="" type="radio"/> YES <input type="radio"/> NO	FOLLOW UP? <input type="radio"/> YES <input checked="" type="radio"/> NO	JURISDICTION NUMBER FL124205	NATL BOARD NO NB252490	OTHER NO
OWNER HOLY COMFORTER SCHOOL INC				NATURE OF BUSINESS SCHOOLS (NO COLLEGE)	KIND OF INSP. <input type="radio"/> INT <input checked="" type="radio"/> EXT	CERT INSP? <input checked="" type="radio"/> YES <input type="radio"/> NO
OWNER STREET ADDRESS 2001 FLEISCHMANN RD				OWNERS CITY TALLAHASSEE	STATE FL	ZIP 32308
USER NAME - OBJECT LOCATION HOLY COMFORTER SCHOOL INC				SPECIFIC LOCATION IN PLANT BLRM BLDG 10	OBJECT LOCATION - COUNTY LEON	
LOCATION STREET ADDRESS 2001 FLEISCHMANN RD				LOCATION CITY TALLAHASSEE	STATE FL	ZIP 32308
TYPE <input type="checkbox"/> FT <input checked="" type="checkbox"/> WT <input type="checkbox"/> CI <input type="checkbox"/> OTHER			YEAR BUILT 2008	MANUFACTURER RAYPAK		
USE <input type="checkbox"/> POWER <input type="checkbox"/> PROCESS <input type="checkbox"/> STEAM HTG <input checked="" type="checkbox"/> HWH <input type="checkbox"/> HWS <input type="checkbox"/> OTHER				FUEL Natural Gas	METHOD OF FIRING Burner	PRESSURE TESTED <input type="radio"/> YES <input checked="" type="radio"/> NO
PRESSURE ALLOWED THIS INSPECTION 160		PREV INSP 160		SAFETY - RELIEF VALVES SET AT 60		TOTAL CAPACITY 1566000 BTUs
OBJECT CAPACITY 1352000 BTUs						
IS CONDITION OF OBJECT SUCH THAT A CERTIFICATE MAY BE ISSUED? <input checked="" type="radio"/> YES <input type="radio"/> NO (IF NO EXPLAIN FULLY UNDER CONDITIONS)				HYDRO TEST <input type="radio"/> YES <input checked="" type="radio"/> NO PSI		
				DATE		

CONDITIONS: With respect to the internal surface, 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.

NO ADVERSE CONDITIONS NOTED

REQUIREMENTS: (List Code Violations)

NONE

NAME AND TITLE OF PERSON TO WHOM REQUIREMENTS WERE EXPLAINED

CHARLES WILLIAMS

CONTACT PHONE (850) 284-3537 cell

THEREBY CERTIFY THIS IS A TRUE REPORT OF MY INSPECTION

INSPECTOR NAME John Scherer

SIGNATURE OF INSPECTOR

John D. Scherer

IDENT. NO

586

EMPLOYED BY

HARTFORD STEAM BOILER INSPECTION AND INSURANCE COMPANY 9265

DI4-379,

10-1-2000