

**DIVISION OF THE STATE FIRE MARSHALL
BUREAU OF FIRE PREVENTION
BOILER SAFETY PROGRAM**

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

Boiler - Fired Pressure Vessel report of Inspection

Date Inspected 05/07/2020	Cert. Exp Date	Certificate Posted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Follow Up Inspection <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Jurisdiction Number 021182	Nat'l Bd. No. 16166	Other No.
Owner VHA Southeast - Bay Medical Center			Owner Email sammy.sims@medxcelfm.com		Kind of Inspection <input checked="" type="checkbox"/> Int <input type="checkbox"/> Ext	Cert Inspection <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner Street Address 615 N. Bonita Ave. (Attn: Sammy Sims, Dir. Facilities)			Owner City Panama City		State FL	Zip 32401-3600
User Name - Object Location Bay Medical Sacred Heart Health System			Nature Of Business General Medical and Surgical		Object Location - County Bay	
User Street Address 615 N. Bonita Ave.			User City Panama City		State FL	Zip 32401-3623
Type Fire Tube	ASME Code Stamp S	Year Built 2009	Manufacturer Cleaver Brooks			
Specific Location in Plant SCEP		Use Process	Fuel Natural Gas	Method of Firing Automatic	Pressure Gage Tested <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Pressure Allowed 150	This Inspection 150 psi	Prev. Inspection 150 psi	Safety Relief Valves Set At 150 psi	Total Capacity 17401 LB/HR	Heating Surface and/or BTU 2000 sq ft / 13800000 BTU/hr	
Is condition of object such that a certificate may be issued? (If No, explain fully under condition)				Hydro Test <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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 conditions of setting, linings, baffles, supports, etc. Describe any major changes or repairs made since last inspection.

**FL-8.6.1 TUBE, TUBESHEET, BOILER PROPER CRACK To be repaired by ADCO Boiler – FL-8.6.1 TUBE, TUBESHEET, BOILER PROPER CRACK
REF: 1998 EDITION 1999 ADDENDA NBIC PARAGRAPH RB-3133. CRACKING OF TUBESHEET, TUBES, OR BOILER PROPER WAS FOUND**

REQUIREMENTS: (List of Code Violations)

The cracked tubes shall be replaced with ASME rated tubes appropriate for this boiler. The area around the cracked tubes should be checked by dye penetrant to make sure no cracks exist in the tube sheet. Any cracks found shall be repaired. All boiler repairs are to be performed and documented by an authorized boiler repair company.

Name and Title of Person To Whom Requirements Were Explained
Allen Johnson

I HEREBY CERTIFY THIS IS A TRUE REPORT OF MY INSPECTION

Inspector Name <i>Gordon King</i>	Ident. No. FL-530 NB-12281	Employed By FM Global	Ident. No. 30275196
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**D14-379
10/01/2000**