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

	1	la		T=		- 		- 			
Date Inspected 12/27/2022	Cert. Exp Date		icate Posted Yes No	Follow Up	Inspection ✓ No	08593	tion Number 5	Nat'l Bo		Other No. H89 6312	
Owner				Owner E	mail				of Inspection		
Jefferson Corre		ion (SOF	")		10 0''				Int ✓ Ext		
Owner Street Address					Owner City				State FL	Zip	
1050 Big Joe Rd User Name - Object Location					Monticello				FL 32344-5188 Object Location - County		
	Nature Of Business Nonclassifiable Establishments Object Location - County Jefferson					lion - County					
Jefferson Correctional Institution (SOF) User Street Address									State	Zip	
1050 Big Joe Rd					Monticello	,			FL	32344-5188	
Type	-	ASME C	Code Stamp	Year Built	Manufactur				<u>ı- – </u>	020110100	
Coil		H	oud Glamp	1989	AO Smith	·					
Specific Location	in Plant		Use		Fuel		Method of Fi	ring	Pressur	re Gage Tested	
G-Dorm			Hot Water H	eating	Propane		Automatic			Yes ✓ No	
Pressure This In:		Prev. Inspe			/alves Set A		Capacity		Heating	Surface and/or BTU	
Allowed 160	'	160		0	p:		00000 BTU/HR		40.6 sq	ft / 670000 BTU/hr	
Is condition of obj			nay be issued?				Hydro Test	DC	N DATE		
(If No, explain full	y under condition	ı <u>)</u>		✓ Ye	s 🔲	No	Yes	PS	BI DATE	✓ No	
CONDITIONS	: With respect to	the interna	al surface, desc	ribe and state	e location of a	any scale,	oil or other depo	sits. 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.											
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In Corvine inc	In Coming inquestion completed Dellar shares as since of lealer an demand. Towards as settled as an extension of the control o										
In-Service inspection completed. Boiler shows no signs of leaks or damage. Temperature controls operational, RV lifted, Flow switch operational. No issues noted.											
REQUIREME	VIS: (List of Cod	de Violatior	ns)								
None Require	ed.										
Name and Title of Anthony Shiver	Person To Whor	m Require	ements Were E	xplained							
-	EV THIC IC & T	DIIE DEDA	OPT OF MV II	ISDECTION							
HEREBY CERT		NUE KEP	OK I OF WIY IN	ISPECTION							
Inoncetor Name	ingle-		Idont N-				Employed D			Ident N-	
Inspector Name			Ident. No.				Employed By			Ident. No.	
Charles J. Sch	indler		FL-606 NB-	11697			Liberty Mutua	al Insura	ince Co	30199794	