

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

## Boiler-Fired Pressure Vessel REPORT OF INSPECTION

This inspection is in	ntended for your sa	fety and the saf	ety of the citizens of	Florida. Your cooperation is gro	eatly appred	iated.					
<b>DATE INSPECTED</b> 02/25/2025	CERT EXP DATE	CERT POSTE  ● Yes ○ No		JURISDICTION NUMBER FL018817		NATL BOARD NO OTHER NO 11405					
OWNER XENIA HOTEL & RES	SORTS		NATURE OF BUSINESS HOTELS & MOTELS		KIND OF INSP.  INT CEXT		CERT INSP ?  ○ Yes ■ No				
OWNER STREET AL 200 S ORANGE AVE			OWNERS CITY ORLANDO		STATE FL		<b>ZIP</b> 32801				
USER NAME - OBJECT LOCATION GRAND CYPRESS				SPECIFIC LOCATION IN PLANT STEAM BLRM		OBJECT LOCATION - COUNTY ORANGE					
LOCATION STREET ADDRESS 1 GRAND CYPRESS BLVD				LOCATION CITY STA ORLANDO FL		STATE         ZIP           FL         32836					
TYPE  ✓ FT	□ CI □	OTHER	YEAR BUILT 2009	MANUFACTURER SELLERS							
USE  ☐ POWER ☑ PROCESS ☐ STM HTG ☐ HWH ☐ HV			HWS _ OTHER	FUEL Natural Gas	METHOD OF FIRING Burner			PRESSURE TESTED  O Yes No			
PRESSURE ALLOWED THIS INSPECTION 150 PREV INSP 150 SET AT 150				F VALVES TOTAL CAPACITY 4,238	Pounds Per Hour 2,760,000 BTU						
IS CONDITION OF OBJECT SUCH THAT A CERTIFICATE MAY BE ISSUED ?  Yes Ono (IF NO EXPLAIN FULLY UNDER CONDITIONS)				P HYDRO TEST  O Yes ● 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.											
INTERNAL NON CERT INSPECTION - IN ACCORDANCE WITH ASME, NBIC, AND JURISDICTIONAL CODES AND STANDARDS. INSTALLATION OF CONTROLS AND SAFETIES WERE VERIFIED, BOILER WATERSIDES WERE INSPECTED AND NOTED. BOILER FIRESIDES WERE INSPECTED AND FOUND NO MAJOR INDICATIONS OF LEAKAGE AT THIS TIME. LWCO COLUMNS AND CHAMBERS WERE CLEAN. VERIFIED NEW RELIEF VALVE INSTALLATIONS AND INFORMATION.											
REQUIREMENTS: (Li	ist Code Violations)	)									
NONE											
NAME AND TITLE OF PERSON TO WHOM REQUIREMENTS WERE EXPLAINED  MIKE CARDWELL  CONTACT PHONE (407) 284-0652  THEREBY CERTIFY THIS IS A TRUE REPORT OF MY INSPECTION											
INSPECTOR NAME	Henry Torres										

**EMPLOYED BY** 

HARTFORD STEAM BOILER INSPECTION AND INSURANCE COMPANY 9265

DI4-379,

**IDENT. NO** 

1829

SIGNATURE OF INSPECTOR

10-1-2000



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02/26/2025		● Yes ○ No	○Yes ● No	FL018817	11405						
OWNER				NATURE OF BUSINESS	KIND OF I	NSP.	CERT INSP ?				
XENIA HOTEL & RE	SORTS			HOTELS & MOTELS	● INT ○	EXT	○Yes • No				
OWNER STREET A	DDRESS			OWNERS CITY	STATE		ZIP				
200 S ORANGE AVE	STE 2700			ORLANDO	FL		32801				
USER NAME - OBJE	CT LOCATION			SPECIFIC LOCATION IN PLAN	IT OBJECT L	OBJECT LOCATION - COUNTY					
GRAND CYPRESS				STEAM BLRM OF		ORANGE					
LOCATION STREET	ADDRESS			LOCATION CITY	STATE		ZIP				
1 GRAND CYPRESS	BLVD			ORLANDO	FL		32836				
TYPE			YEAR BUILT	MANUFACTURER							
✓ FT 🗌 WT	☐ CI ☐	OTHER	2009	SELLERS							
USE				FUEL	METHOD OF FIRING		PRESSURE TESTED				
☐ POWER ✓ PRO	OCESS STM HT	G 🗌 HWH 📗	HWS   OTHER	Natural Gas	Burner		○Yes • No				
PRESSURE ALLOW	'ED		SAFETY - RELIEI	F VALVES	OBJECT CAPACIT		T CAPACITY				
THIS INSPECTION 150 PREV INSP 150 SET AT 150				TOTAL CAPACITY 4,238	Pounds Per Hour 2,760,00		000 BTUs				
IS CONDITION OF O	BJECT SUCH THAT	T A CERTIFICATI	E MAY BE ISSUED 1	? HYDRO TEST							
● Yes ○ No	(IF NO EXPLAIN FU	JLLY UNDER CO	NDITIONS)	○ Yes ● 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.  INTERNAL NON CERT INSPECTION - IN ACCORDANCE WITH ASME, NBIC, AND JURISDICTIONAL CODES AND STANDARDS. INSTALLATION OF CONTROLS AND SAFETIES WERE VERIFIED, BOILER WATERSIDES WERE INSPECTED AND NOTED. BOILER FIRESIDES WERE INSPECTED AND FOUND NO MAJOR INDICATIONS OF LEAKAGE AT THIS TIME. LWCO COLUMNS AND CHAMBERS WERE CLEAN. VERIFIED NEW RELIEF VALVE INSTALLATIONS AND INFORMATION.											
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NAME AND TITLE O MIKE CARDWELL THEREBY CERTIFY					PNTACT PHONE (407)	284-0652					
INSPECTOR NAME	Henry Torres										

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