



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

**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 03/07/2025	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 252490	OTHER NO	
OWNER NULL		NATURE OF BUSINESS OCCUPANCY UNKNOWN		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 NULL		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"/> STM 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.

CERTIFICATE EXTERNAL INSPECTION CONDUCTED. SAFETY DEVICES SAT. NO RECOMMENDATIONS NOTED DURING VISIT.

REQUIREMENTS: (List Code Violations)

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 Dawson Denmark

SIGNATURE OF INSPECTOR

*D. D. K.*

IDENT. NO

24-001551

EMPLOYED BY

HARTFORD STEAM BOILER INSPECTION AND INSURANCE COMPANY 9265