



ADVANCE NOTICE OF INSTALLATION FORM

INSTALLATION: New Reinstalled Second Hand Date ____/____/____

| INSTALLER | OWNER-USER | OBJECT LOCATION |
|------------------|--------------------|------------------|
| Name | Name | Name |
| Street | Street, PO Box, RR | Street |
| City, State, ZIP | City, State, ZIP | City, State, ZIP |

| | | | | | | | |
|--|--|---|--|--|--|-------------|------------|
| Jurisdiction No. | National Board No. | Manufacturer | | Mfg. Serial No. | Year Built | Boiler Type | Boiler Use |
| Fuel | Method of Firing | Btu/kW input | Btu/kW output | Operating PSI | ASME Code Designator(s) <input type="checkbox"/> A <input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> HLW <input type="checkbox"/> M <input type="checkbox"/> E <input type="checkbox"/> H <input type="checkbox"/> Other | | |
| Stamped MAWP | Heating Surface, Sq. Ft. | Cast Iron | Manhole | Specific On-Site Location, i.e., Utility Room | | | |
| Pressure Relief Valve Size | Pressure Relief Valve Set Pressure | Pressure Relief Valve Capacity <input type="checkbox"/> Btu/hr <input type="checkbox"/> Lb/hr | Manufacturer | Low-Water Fuel Cutoff Mfg. _____ No. _____ | | | |
| 1. _____ 2. _____ 3. _____ 4. _____ | 1. _____ 2. _____ 3. _____ 4. _____ | 1. _____ 2. _____ 3. _____ 4. _____ | 1. _____ 2. _____ 3. _____ 4. _____ | Probe Type | _____ | | |
| | | | | Flow Switch | _____ | | |
| | | | | Float & Chamber | _____ | | |
| | | | | Other (Specify) | _____ | | |

| | | |
|---|---|---|
| PRESSURE/ALTITUDE GAGE: Dial Graduation _____ Valve/Cock Size _____ MAWP _____ Pipe Connection Size _____ Siphon or Equivalent Device <input type="checkbox"/> Yes <input type="checkbox"/> No | EXPANSION TANK: ASME Constructed <input type="checkbox"/> Yes <input type="checkbox"/> No Other _____ MAWP _____ No. Gallons _____ | VENTILATION AND COMBUSTION AIR Unobstructed Opening (sq. in.) _____ Power Ventilator Fan (CFM) _____ |
| WATER LEVEL INDICATORS: Number of Gage Glasses _____ Number of Remote Indicators _____ Size of Connection Piping _____ | FEED WATER SUPPLY: Number of Feeding Means _____ Pipe Size _____ Stop Valve Size _____ MAWP _____ Check Valve Size _____ MAWP _____ | |
| STOP VALVES: Number of Valves _____ Valve Size _____ | EXTERNAL PIPING ASME CODE: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other _____ | FUEL TRAIN: <input type="checkbox"/> CSD-1 <input type="checkbox"/> NFPA-85 <input type="checkbox"/> Other _____ |
| BOTTOM BLOWDOWN CONNECTIONS: Number of Valves _____ Valve Size _____ MAWP _____ Piping Run Full Size <input type="checkbox"/> Yes <input type="checkbox"/> No | POTABLE WATER HEATER UNIQUE REQUIREMENTS <input type="checkbox"/> Yes <input type="checkbox"/> No Inlet Stop Valve Size _____ MAWP _____ Outlet Stop Valve Size _____ MAWP _____ Drain Valve Size _____ Thermometer <input type="checkbox"/> Yes | |
| Manufacturer's Certification Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No Does boiler replace existing one: <input type="checkbox"/> Yes <input type="checkbox"/> No | Clearance from walls and floors: Side _____ Bottom _____ Top _____ | |

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|--|---|
| Additional recommendations and remarks by installer: | |
| | |
| Installer Name (PRINT) _____ | I HEREBY CERTIFY THAT THE INSTALLATION COMPLIES WITH THE IOWA CODE AND ADMINISTRATIVE RULES _____ Installer Signature |