

THE CITY OF NEW YORK
 DEPARTMENT OF BUILDINGS
 BOILER COMPLIANCE LAYOUT

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ITEM	LENGTH	FORMAT
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1. BORO	1	(1,2,3,4,5)
2. BOILER NUMBER	10	RIGHT JUSTIFIED, LEADING 0'S
3. BOILER TYPE	1	(Y,N) Y= MD, N= COMMERCIAL
4. BOILER SERIAL NUMBER	2	(01,02,03, ECT.)
5. PREMISE BLDG. NUMBER	10	RIGHT JUSTIFIED
6. PREMISE STREET NAME	32	LEFT JUSTIFIED
7. PREMISE BLOCK	5	RIGHT JUSTIFIED, LEADING 0'S
8. PREMISE LOT	5	RIGHT JUSTIFIED, LEADING 0'S
9. INSPECTION DATE	6	(YYMMDD)
10. VIOLATION ISSUED	1	(Y,N) Y= YES, N= NO.
11. INSPECTOR TYPE	1	(O,B,P)
12. LICENSE NUMBER	3	EG. = 999 (NUMERIC)

NOTE: BORO
 (1) MANHATTAN
 (2) BRONX
 (3) BROOKLYN
 (4) QUEENS
 (5) STATEN ISLAND

INSPECTOR TYPE
 (O) OIL BURNER INSTALLER
 (B) HIGH PRESSURE OPERATOR
 (P) MASTER PLUMBER

THE CITY OF
NEW YORK

DEPARTMENT OF BUILDINGS

Electronic Filing Transmittal Sheet for Low Pressure Boiler Annual Inspection Report

Filing for the year of _____ .

For Dept. Use Only

Received:

Transmittal No.:

1. Authorized N.Y.C. Boiler Inspector			
Name	License Number		
Address	City	State	Zip
Contact Person	Business Phone ()		
<input type="checkbox"/> Oil Burner Equipment Installer <input type="checkbox"/> Master Plumber <input type="checkbox"/> High Pressure Boiler Operator			
2. Boiler Insurance Company			
(Fill out only if insurance company performed inspection.)			
Insurance Company			
Address	City	State	Zip
Contact Person	Business Phone ()		
Name of Policy Holder			
Address	City	State	Zip
Certificate / Policy No.	Expiration Date		
3. Inspector's / Boiler Insurance Company's Statement			
I attest that the boilers listed in Item 4 below were inspected in accordance with the requirements of Section 204 of the Industrial Code and Rule 4 of the New York State Labor Law.			
Licensed Inspector's Name or the Insurance Company's Authorized Representative's or Officer's Name :			
Signature		Date	
Inspector's Seal (Only for Master Plumber)			
No. of boilers filed : _____ Page 1 of _____			
Note : The transmittal sheets will not be accepted if the forms are incomplete. If this transmittal sheet is not filed by the inspector or by the boiler insurance company prior to January 1, the building owner shall be liable for a civil penalty, pursuant to Section 26-125 of the Administrative Code. Mail to : N.Y.C. Department of Buildings, Boiler Division, 60 Hudson Street, 14th Floor, New York, NY 10013.			

For Dept. Use Only

Transmittal No. :

No. of checks :

Total \$:

The following list of boiler inspections, arranged by the borough, block and lot numbers, were conducted by this office. (For the borough number, use 1 for Manhattan, 2 for Bronx, 3 for Brooklyn, 4 for Queens, 5 for Staten Island. List a maximum of 40 boilers per page, single-spaced. Please have the licensed inspector or the Insurance Company Representative or Officer sign the bottom of every page.)

4. Inspection Reports Submitted on Computer Disk

B o r o	Block	Lot	Boiler Number	Inspection Date	Violations Found	Check No.	Inspector's Name	License No.
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