



TEXAS DEPARTMENT OF LICENSING AND REGULATION

Licensing Division
 (512) 463-6599 - (800) 803-9202
 Fax (512) 475-2871 CSBoiler@TDLR.Texas.gov

Technical
 (512) 539-5716
 Boilers@TDLR.Texas.gov

P.O. Box 12157 - Austin, Texas 78711 - www.tdlr.texas.gov

Boiler Equipment Report of Inspection

PURSUANT TO CHAPTER 755, HEALTH AND SAFETY CODE, 16 TX ADMINISTRATIVE CODE, CHAPTER 65, AND OCCUPATIONS CODE CHAPTER 51

TX# *	* <input type="checkbox"/> 1ST INSPECTION	<input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> EXTERNAL	STATUS: *	<input checked="" type="checkbox"/> ACTIVE	<input type="checkbox"/> DISCONNECTED IN PLACE	<input type="checkbox"/> EXEMPT	<input type="checkbox"/> NEW
TX141903	<input checked="" type="checkbox"/> SUBSEQUENT	<input checked="" type="checkbox"/> NON-CERTIFICATE			<input type="checkbox"/> JUNKED	<input type="checkbox"/> DISPOSITION UNKNOWN		<input type="checkbox"/> 2ND HAND

IDENTIFIED BY: * DECAL STAMP TAG VARIANCE: * YES NO TEXAS SPECIAL: * YES NO

PHYSICAL ADDRESS <small>(if the physical address has changed a first inspection is required)</small>	OWNER ADDRESS	MAILING ADDRESS
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NAME *	NAME	NAME
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Orion	DEGGUSA CORPORATION	DEGGUSA CORPORATION
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(Address 1) *	(Address 1)	(Address 1)
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1513 Echo Ave	1513 ECHO RD	P O BOX 677
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(City, State, Zip) *	(City, State, Zip)	(City, State, Zip)
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Orange, TX 77632-2059	ORANGE , TX 77630	PARISPANY, NJ 07054
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LOCATION PHONE:	OWNER PHONE: 4099807909	CONTACT NAME: DEGGUSA CORPORATION
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OBJECT LOCATION: *	OWNER EMAIL:	CONTACT PHONE:
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PLANT BLR AREA	Nature of Business: Petroleum	CONTACT EMAIL:
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MANUFACTURER *	NAT'L BOARD #	SERIAL NUMBER	MFGR MODEL #
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ABCO	002430	8721	
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Boiler MAWP *	YEAR BUILT *	INTERVAL *	BLR TYPE *	BLR USE *	HEATING SURFACE	CAP (GAL)	MIN SRV	MAX STEAM	ASME STAMP *
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150	1987	12	Fire Tube	Power	1960				U
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SAFETY RELIEF VALVE DATA			LOW WATER CUTOFF TYPE		FUEL *	BTU/HR INPUT
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SET PRESSURE HIGHEST *	TOTAL CAP. *	# OF SAFETIES	<input type="checkbox"/> PROBE TYPE	<input checked="" type="checkbox"/> FLOAT & CHAMBER	Recovered Heat	BTU/HR OUTPUT
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150	1	2	<input type="checkbox"/> FLOW SWITCH	<input type="checkbox"/> OTHER _____		
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LOWEST * 150	<input type="checkbox"/> BTU/HR	<input checked="" type="checkbox"/> #/HR	MAWP: 150	8500000
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EXPANSION TANK ASME * <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	EXPANSION TANK MAWP	EXTERNAL PIPE ASME <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
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EXTENSION INSPECTION? <input type="checkbox"/> YES <input type="checkbox"/> NO	EXTENSION APPROVAL DATE (IF APPLICABLE)
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Comments: Sch. internal
One of the SV leaking

ITEM # - LAW/RULE	VIOLATION (ATTACH ADDITIONAL PAGES IF NECESSARY)
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1 - 65.100(h)(3)(C)	COND: Pressure Relief Device is not sufficient, additional device is not ins (continued on Supplemental Report...)
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See Supplemental Report for complete list of open violations

I HEREBY CERTIFY THAT THIS IS A TRUE REPORT AS A RESULT OF MY INSPECTION.



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Boiler Equipment Report of Inspection - Supplemental Report

TX # TX141903

Date: 09/15/2014

Location Name Orion

Object Address 1513 ECHO RD , ORANGE , TX 77630

Location On Site PLANT BLR AREA

Comments:

Sch. internal
One of the SV leaking

Remarks:

1 - 65.100(h)(3)(C) COND: Pressure Relief Device is not sufficient, additional device is not installed.
Leaking Steam

Name of Authorized/Deputy Inspector Mike Spurling Signature 

Inspection Organization TX COMMISSION # 1792 Date 09/15/2014

Owner/Operator DEGGUSA CORPORATION Title
Name