



TEXAS DEPARTMENT OF LICENSING AND REGULATION

Regulatory Program Management Division/Boiler Program
P. O. Box 12157 • Austin, Texas 78711 • (512) 539-5716 • Fax (512) 539-5687
Email Address: boilers@tdlr.texas.gov Web site: www.tdlr.texas.gov

BOILER ACCIDENT REPORT

Date of Accident _____ TX Boiler # _____ Owner/Operator _____

Object Address _____

- Boiler Type:
- Heating boiler steam (steam heating boiler)
 - Heating boiler water (hot water heating boiler: hot water supply boiler; or potable water heater)
 - Nuclear boiler (a nuclear power plant system)
 - Power boiler (high temperature boiler, portable power boiler)
 - Unfired steam boiler (unfired pressure vessel)
 - Process steam generator (evaporator, heat exchange or vessel in which steam is generated by use of heat)
 - Other

Boiler Use: _____

Injuries/Deaths:

Property Damage:

- Suspected Cause:
- | | |
|--|---|
| <input type="checkbox"/> Safety Valve | <input type="checkbox"/> Improper Repair |
| <input type="checkbox"/> Low Water Condition | <input type="checkbox"/> Faulty Design or Fabrication |
| <input type="checkbox"/> Limit Controls | <input type="checkbox"/> Operator Error or Poor Maintenance |
| <input type="checkbox"/> Improper Installation | <input type="checkbox"/> Burner Failure |
| <input type="checkbox"/> Other/Comment: _____ | |

Inspection Status

Current Certificate of Operation? YES NO

Inspected by:

Inspecting Organization:

Report Submitted By

Name of Authorized Inspector or Deputy Inspector:

Signature of Authorized Inspector or Deputy Inspector:

Company:

Date:

Please attach any photos or further narrative to this report to describe the circumstances surrounding the accident.

NOTE: If additional space is needed to complete this form, please utilize TDLR Form 026BLR, Boiler Supplemental Report

RETURN COMPLETED FORM TO: Chief Boiler Inspector

Via: 1) boilers@tdlr.texas.gov; 2) fax to 512-539-5687; or USPS to TDLR, Attn: Boiler Program, PO Box 12157, Austin, TX 78711