



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

REPORT OF ALTERATION
For State Certificate of Authorization Holders ONLY
In accordance with provisions of the State of Texas Boiler Law and Rules

1a. Work performed by: (name of organization responsible for work) (Form No.)
(street address, city, state, ZIP Code) (e-mail address)

1b. Design performed by: (name of organization responsible for work) (Form No.)
(street address, city, state, ZIP Code) (e-mail address)

2. Owner: (name)
(street address, city, state, ZIP Code)

3. Location of installation: (name of location)
(street address, city, state, ZIP Code)

4. Unit identification: (boiler) Name of original manufacturer: (name of original manufacturer)

5. Identifying Numbers: (mfg serial No.) (National Board No.) (jurisdiction No.) (other) (year built)

6. NBIC Edition / Addenda: (edition) (addenda)
Original Code of Construction for Item: (edition) (addenda)
Construction Code Used for Alteration Performed: (edition) (addenda)

7a. Description of construction work: (use supplemental sheet(s), if necessary)

7b. Description of design scope: (use supplemental sheet(s), if necessary)

Pressure test, if applied: psi MAWP psi

8. Replacement Parts: Attached are Manufacturer's Partial Data Reports properly completed for the following items of this report.
(name of part, item number, data report type, mfg's name, and identifying mark)

9. Remarks:

DESIGN CERTIFICATION

I, _____, certify that to the best of my knowledge and belief the statements in this report are correct and the design change described in this report conforms to the *National Board Inspection Code*.
 State of Texas Certificate of Authorization No. _____ Expires on: _____

Date

(name of design organization)

(signature of authorized representative)

CERTIFICATE OF DESIGN CHANGE REVIEW

I, _____, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and certificate of competency issued by the jurisdiction of _____ and employed by _____ of _____ have reviewed the design change described in this report and state that to the best of my knowledge and belief such change complies with the applicable requirements of the *National Board Inspection Code*.
 By signing this certificate, neither the undersigned nor my employer makes any warranty, expressed or implied, concerning any personal injury, property damage or loss of any kind arising from or connected with this inspection.

Date

(Inspector signature)

Commissions (National Board and jurisdiction no.)

CONSTRUCTION CERTIFICATION

I, _____, certify that to the best of my knowledge and belief the statements in this report are correct and that all material, construction, and workmanship on this Alteration conforms to the *National Board Inspection Code*.
 State of Texas Certificate of Authorization No. _____ Expires on: _____

Date

(name of repair organization)

Signature of authorized representative

CERTIFICATE OF INSPECTION

I, _____, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and certificate of competency issued by the jurisdiction of _____ and employed by _____ of _____ have inspected the work described in this report on _____ and state that to the best of my knowledge and Belief this work complies with the applicable requirements of the *National Board Inspection Code*.
 By signing this certificate, neither the undersigned nor my employer makes any warranty, expressed or implied, concerning the work described in this report. Furthermore, neither the undersigned nor my employer shall be liable in any way for any personal injury, property damage or loss of any kind arising from or connected with this inspection.

Date

Inspector Signature

Commissions (National Board and jurisdiction no.)

NOTE: If additional space is needed to complete this form, please utilize TDLR Form 025BLR, Supplemental Sheet.

Submit completed form to TDLR Boiler Program: 1) to boilers@tdlr.texas.gov; 2) via fax to 512-539-5687; or 3) to TDLR, ATTN: Boiler Program, PO Box 12157, Austin, TX 78711