



# TEXAS DEPARTMENT OF LICENSING & REGULATION

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| ACCIDENT REPORT   |                                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
|---|------------------------------------|----------------------------------|-----------------|---------------------|------------------------------|----------------|------------------------------------|-----------------------|----------------|----------------|--|
| Date of Accident:   | Texas Boiler #:                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| Owner/Operator:   | Object Address:                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| <u>Boiler Type</u><br>Heating boiler steam (steam heating boiler)<br>Heating boiler water (hot water heating boiler; hot water supply boiler; potable water heater)<br>Nuclear boiler (a nuclear power plant system)<br>Power Boiler (high temperature boiler, portable power boiler)<br>Unfired steam boiler (unfired pressure vessel)<br>Process steam generator (heat exchange or vessel in which steam is generated by use of heat)<br>Other:                                     |                                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| Boiler Use:   |                                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| Injuries/Deaths:  |                                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| Property Damage:  |                                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| <u>Suspected Cause – select all that apply</u><br><table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Safety Valve</td> <td style="width: 50%;">Improper Repair</td> </tr> <tr> <td>Low Water Condition</td> <td>Faulty Design or Fabrication</td> </tr> <tr> <td>Limit Controls</td> <td>Operator Error or Poor Maintenance</td> </tr> <tr> <td>Improper Installation</td> <td>Burner Failure</td> </tr> <tr> <td colspan="2">Other/Comment:</td> </tr> </table> |                                    | Safety Valve                     | Improper Repair | Low Water Condition | Faulty Design or Fabrication | Limit Controls | Operator Error or Poor Maintenance | Improper Installation | Burner Failure | Other/Comment: |  |
| Safety Valve  | Improper Repair                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| Low Water Condition   | Faulty Design or Fabrication       |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| Limit Controls  | Operator Error or Poor Maintenance |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| Improper Installation   | Burner Failure                     |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| Other/Comment:  |                                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| <u>Inspection Status</u><br><table style="width: 100%; border: none;"> <tr> <td style="width: 40%;">Current Certificate of Operation</td> <td style="width: 10%;">Yes</td> <td style="width: 10%;">No</td> </tr> </table> Inspected by:<br>Inspecting Organization:   |                                    | Current Certificate of Operation | Yes             | No                  |                              |                |                                    |                       |                |                |  |
| Current Certificate of Operation  | Yes                                | No                               |                 |                     |                              |                |                                    |                       |                |                |  |
| <u>Report Submitted By</u><br>Name of Authorized Inspector or Deputy Inspector:<br>Signature of Authorized Inspector or Deputy Inspector:<br>Company: <span style="float: right;">Date:</span>  |                                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |
| Please attach any photos or further narrative to this report to describe the circumstances surrounding the accident.  |                                    |                                  |                 |                     |                              |                |                                    |                       |                |                |  |

If additional space is needed to complete this form, please utilize TDLR Form BLR026N, Boiler Supplemental Report.

Submit completed form to TDLR Boiler Program via email to [boilers@tdlr.texas.gov](mailto:boilers@tdlr.texas.gov) or via USPS to TDLR, ATTN: Boiler Program, PO Box 12157, Austin, TX 78711.