Iowa Division of Labor
Boiler and Pressure Vessel Safety
1000 East Grand Avenue
Des Moines, IA 50319-0209
Phone: 515-725-5609
Fax: 515-242-5076
boilers@iwd.iowa.gov
www.iowaboilers.gov

FOR OFFICE USE ONLY
Date Received: _____
Object #: _____
Inspection Date: _____

Advance Notice of Boiler Installation

Instructions

The boiler or pressure vessel must pass inspection prior to operation.

Iowa Code Section 89.6 requires this form be filed with the Labor Commissioner at least 10 days prior to installation. Send the completed application to the address above. Review the applicable rules prior to installation found on our webpage.

Owner information

Name	Phone number	Fax number	Email address		
Address		City		State	Zip

Will a boiler insurance inspection service be used? ☐ **Yes** ☐ **No** **If yes, notify the boiler insurance company immediately.**
Name of insurance company: _____

Object location information

Name			Phone Number	
Address		City	State	Zip
Manufacturer	Year built	Installation type: ☐ New ☐ Reinstallation	Installation date	

Does boiler replace existing boiler? ☐ Yes ☐ No **If yes, old state ID#:** _____

Boiler use	Specific on-site location	Fuel	Method of firing

Code stamp: ☐ A ☐ S ☐ U ☐ HLW ☐ M ☐ E ☐ H ☐ Other:

Sales Representative	Phone number

Comments:

I certify that the information on this form is true and accurate to the best of my knowledge.

Name of individual completing form	Business name	Phone number
Email address	Signature	Date

Equal Opportunity Employer/Program
Auxiliary aids and services are available upon request to individuals with disabilities.
For deaf and hard of hearing, use Relay 711.