### STATE OF TENNESSEE

**BOILER OR PRESSURE VESSEL ACCIDENT REPORT**

**STATE NO. TENN. ____________**

1) Name of User

2) Type of boiler or vessel

   - A.S.M.E. Symbol
   - Date of Accident
   - (W.T. boiler, S.M. boiler, air tank, heat exchanger, etc.)
   - (S.H.U., etc.)

3) Type accident

   - Location of Accident
   - (Explosion pressure parts, furnace explosion, dry-fired, etc.)
   - (City & State)

4) Type of business where used

   - Used for
   - (Apartment, cannery, school, dry cleaners, sawmill, etc.)
   - (Power, Process, Hot Water Heating, etc.)

5) Manufacturer

   - Mfgers. Serial No.
   - National Board No.

6) M.A.W.P.

   - Type fuel or source of pressure
   - Automatic operation?
   - (Gas, Coal, Electric, Air Compressor, etc.)

7) Safety valve installed?

   - Set pressure
   - A.S.M.E.-NB Rated
   - Relieving Capacity

8) Date of last inspection

   - Inspection Cert. approved?
   - Expiration Date

9) Number of Person Killed

   - Number of persons injured
   - Approx. property damage

10) Disposition of boiler or vessel (if known)

    - Repaired
    - Replaced
    - Scrapped

11) Briefly describe apparent cause of accident

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Insurance Company

Submitted by

Located

IN-0927