

# Boiler/Pressure Vessel Installation Permit

Oklahoma Department of Labor  
Safety Standards Division Boiler/PV Inspections  
3017 N. Stiles Ave, Suite 100  
Oklahoma City, OK 73105  
(405) 521-6100 Ext 3

**PERMIT NUMBERS CANNOT BE ISSUED NOR INSPECTIONS  
SCHEDULED UNTIL PAYMENT HAS BEEN PROCESSED**

**Boiler/Pressure Installer Permit Fee: \$10 Per Boiler/PV Listed Below**

**Remit Application To:**  
**odolboilers@labor.ok.gov**

*\*Required to use separate permit form for each different physical address\**

**INSTALLER:**

Name Address City & Zip License # License Expiration Date

**OWNER OF BOILER/PV:**

Name Address City & Zip Contact Person Phone Number:

**INSPECTION BILLING**

**PARTY: Name** Address City & Zip Billing Person Phone Number:

Billing Contact Person Email:

**OBJECT LOCATION:**

User Name Address City, Zip & County On Site Contact Name and Phone #

Will this replace an existing boiler/pv? Yes No OK# Replaced

Specific Location: (i.e. 3rd floor utility room)

OK# National Board# Manufacturer Manufacturer Serial # Year Built

**Unit Type:**

|                                |                                  |                                 |                                    |                 |  |                 |
|--------------------------------|----------------------------------|---------------------------------|------------------------------------|-----------------|--|-----------------|
| Sec 1 HP Steam<br>(more 15psi) | Sec IV LP Steam<br>(less 15 psi) | Sec IV Hotwater<br>Heating Bldg | Sec IV Hotwater<br>Supply Domestic | Sec VIII<br>Air | Sec VIII<br>CO <sub>2</sub> O <sub>2</sub> | Sec VIII<br>CNG |
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|--------------------------------|----------------------------------|---------------------------------|------------------------------------|-----------------|--|-----------------|

ADDITIONAL RECOMMENDATIONS AND REMARKS BY INSTALLER:

BY INITIALLING BELOW I HEREBY CERTIFY THAT THE INSTALLATION COMPLIES WITH JURISDICTIONAL CODE REQUIREMENTS

Installer Name (Print)

Initial Here:

*For additional units at this physical address use supplemental form*