

**Iowa Division of Labor**  
**Boiler and Pressure Vessel Safety**

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[www.iowaboilers.gov](http://www.iowaboilers.gov)

**FOR OFFICE USE ONLY**

Date Received: _____
Object #: _____
Inspection Date: _____

**Advance Notice to Convert Power Boiler to Low Pressure Boiler**

**Instructions**

The converted boiler must pass inspection prior to operation. Notify the insurance provider if the boiler is covered by insurance. Iowa Administrative Code Section 875-90.15(89) requires this form be filed with the Labor Commissioner at least 10 days prior to installation. Prior to installation review the application rules at [www.iowaboilers.gov](http://www.iowaboilers.gov). Send the completed application to the address above.

**Owner/User information**

Business name		Phone number	Fax number	
Address		City	State	Zip

**Object location information**

Building name			Phone Number	
Address		City	State	Zip
Object #	Year built	Manufacturer		
Old-maximum allowable working pressure	Old-manufacturers minimum safety valve capacity and rating		New manufacturers minimum safety valve capacity and rating	

**Contractor information (if applicable)**

Name	Phone number	Fax number	Email address	
Address		City	State	Zip

**I certify that the information on this form is true and accurate to the best of my knowledge. Boiler must meet ASME CSD-1 requirements. CSD-1 report must be completed and maintained onsite. Please review Iowa Administrative Code 875-90.15(89) for specific requirements.**

Owner/user name		Title		
Phone number	Fax number	Email address		

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date