

BOILER/FIRED PRESSURE VESSEL - REPORT OF INSPECTION
The Hartford Steam Boiler Inspection and Insurance Co.
Hartford, Connecticut 06102

Standard Form For Jurisdictions Operating Under The ASME Code

Policy **1000022** Location **08486** Designating Number **1**

1 Date Inspected **12/11/2019** Cert Exp Date **11/30/2022** Certificate Posted Yes No Owner Number _____ Jurisdiction Number **WIB0087331** National Board Number _____

2 Owner Name **STANLEY-BOYD AREA SCHOOL DISTRICT** Nature of Business **SCHOOLS (NO COLLEGE)** Kind Of Inspection Internal External Cert. Inspection Yes No

Owner Street Address **507 E 1ST AVE** Owners City **STANLEY** State **WI** Zip Code **54768**

Users Name at Object Location **STANLEY BOYD AREA SCHOOL DISTRICT** Specific Location in Plant **BLR RM** Object Location - County **CHIPPEWA**

3 Users Street Address **507 1ST AVE** Users City **STANLEY** State **WI** Zip Code **54768**

4 Type FT WT CI Other CA BLR Year Built **2008** Manufacturer **P-K**

5 Use Power Process Steam HWH HWS Other HWH Fuel **Natural Gas, Burner** Method of Firing _____ Pressure Gage Test Yes No

6 Pressure Allowed This inspection: **50** Previous Inspection: **50** Safety Relief Valves Set At: **50** Explain If Pressure Changed _____

7 Is Condition Of Object Such That a Certificate May Be Issued? Yes No (If NO, explain fully under conditions) Hydro Test Yes No PSI: _____ Date: **00/00/0000**

8 Conditions:
no code violations maintenance personnel are testing safety relief valves. boiler logs are kept at this location.
!!!! EARLY INSPECTION SO ALL BOILERS COME DUE AT THE SAME TIME.

9 Requirements:
none

10 Name and Title of Person To Whom Requirements Were Explained
TIM TROYER- SUPV. (715) 644-5810

I hereby Certify this is a true report of my inspection:

Signature of Inspector <i>Noreen Oldenburg</i> Noreen Oldenburg	Identification No 1124371	Employed by The Hartford Steam Boiler Inspection and Insurance Co.	NB Commission 13403
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Owner Address Policy Location Special Default Conditions Default Requirements

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Hartford, Connecticut 06102

Standard Form For Jurisdictions Operating Under The ASME Code

Policy 1000022	Location 08486	Designating Number 2
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1 Date Inspected 12/11/2019	Cert Exp Date 11/30/2022	Certificate Posted <input checked="" type="radio"/> Yes <input type="radio"/> No	Owner Number	Jurisdiction Number WIB0084029	National Board Number
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2 Owner Name STANLEY-BOYD AREA SCHOOL DISTRIC T	Nature of Business SCHOOLS (NO COLLEGE)	Kind Of Inspection <input type="checkbox"/> Internal <input checked="" type="checkbox"/> External	Cert. Inspection <input checked="" type="radio"/> Yes <input type="radio"/> No
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2 Owner Street Address 507 E 1ST AVE	Owners City STANLEY	State WI	Zip Code 54768
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3 Users Name at Object Location STANLEY BOYD AREA SCHOOL DISTRIC	Specific Location in Plant BOILER ROOM	Object Location - County CHIPPEWA
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3 Users Street Address 507 1ST AVE	Users City STANLEY	State WI	Zip Code 54768
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4 Type <input type="radio"/> FT <input type="radio"/> WT <input type="radio"/> CI <input checked="" type="radio"/> Other	CA BLR	Year Built 2007	Manufacturer PATTERSON
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5 Use <input type="radio"/> Power <input type="radio"/> Process <input type="radio"/> Steam <input checked="" type="radio"/> HWH <input type="radio"/> HWS <input type="radio"/> Other	HWH	Fuel Natural Gas, Burner	Method of Firing	Pressure Gage Test <input type="radio"/> Yes <input checked="" type="radio"/> No
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6 Pressure Allowed This Inspection: 50	Previous Inspection: 50	Safety Relief Valves Set At: 50	Explain If Pressure Changed
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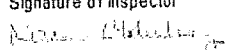
7 Is Condition Of Object Such That a Certificate May Be Issued? <input checked="" type="radio"/> Yes <input type="radio"/> No (If NO, explain fully under conditions)	Hydro Test <input type="radio"/> Yes <input checked="" type="radio"/> No	PSI:	Date: 00/00/0000
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8 Conditions:
no code violations maintenance personnel are testing safety relief valves. boiler logs are kept at this location.

9 Requirements:
none

10 Name and Title of Person To Whom Requirements Were Explained
TIM TROYER- SUPV. (715) 644-5810

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Signature of Inspector  Noreen Oldenburg	Identification No 1124371	Employed by The Hartford Steam Boiler Inspection and Insurance Co.	NB Commission 13403
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Owner Address Policy Location Special Default Conditions Default Requirements

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The Hartford Steam Boiler Inspection and Insurance Co.
Hartford, Connecticut 06102

Standard Form For Jurisdictions Operating Under The ASME Code

Policy 1000022	Location 08486	Designating Number 3
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1	Date Inspected 12/11/2019	Cert Exp Date 11/05/2022	Certificate Posted <input checked="" type="radio"/> Yes <input type="radio"/> No	Owner Number	Jurisdiction Number WIB0083342	National Board Number
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2	Owner Name STANLEY-BOYD AREA SCHOOL DISTRICT	Nature of Business SCHOOLS (NO COLLEGE)	Kind Of Inspection <input type="checkbox"/> Internal <input checked="" type="checkbox"/> External	Cert. Inspection <input checked="" type="radio"/> Yes <input type="radio"/> No
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2	Owner Street Address 507 E 1ST AVE	Owners City STANLEY	State WI	Zip Code 54768
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3	Users Name at Object Location STANLEY BOYD AREA SCHOOL DISTRICT	Specific Location in Plant BOILER ROOM	Object Location - County CHIPPEWA
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3	Users Street Address 507 1ST AVE	Users City STANLEY	State WI	Zip Code 54768
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4	Type <input type="radio"/> FT <input type="radio"/> WT <input type="radio"/> CI <input checked="" type="radio"/> Other	CA BLR	Year Built 2005	Manufacturer PATTERSON
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5	Use <input type="radio"/> Power <input type="radio"/> Process <input type="radio"/> Steam <input checked="" type="radio"/> HWH <input type="radio"/> HWS <input type="radio"/> Other	Fuel Natural Gas, Burner	Method of Firing HWH	Pressure Gage Test <input type="radio"/> Yes <input checked="" type="radio"/> No
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6	Pressure Allowed This inspection: 50	Previous Inspection: 50	Safety Relief Valves Set At: 50	Explain If Pressure Changed
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7	Is Condition Of Object Such That a Certificate May Be Issued? <input checked="" type="radio"/> Yes <input type="radio"/> No (If NO, explain fully under conditions)	Hydro Test <input type="radio"/> Yes <input checked="" type="radio"/> No	PSI:	Date: 00/00/0000
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8
 Conditions:
no code violations maintenance personnel are testing safety relief valves. boiler logs are kept at this location.

9
 Requirements:
none

10
 Name and Title of Person To Whom Requirements Were Explained
TIM TROYER- SUPV. (715) 644-5810

I hereby Certify this is a true report of my inspection:

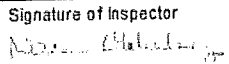
Signature of Inspector <i>Noreen Oldenburg</i> Noreen Oldenburg	Identification No 1124371	Employed by The Hartford Steam Boiler Inspection and Insurance Co.	NB Commission 13403
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Owner Address Default Conditions
 Policy Location Special Default Requirements

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Standard Form For Jurisdictions Operating Under The ASME Code

Policy 1000022				Location 08486		Designating Number 4	
1 Date Inspected 12/11/2019	Cert Exp Date 11/30/2022	Certificate Posted <input checked="" type="radio"/> Yes <input type="radio"/> No	Owner Number		Jurisdiction Number WIB0083343		National Board Number
2 Owner Name STANLEY-BOYD AREA SCHOOL DISTRIC T			Nature of Business SCHOOLS (NO COLLEGE)			Kind Of Inspection <input type="checkbox"/> Internal <input checked="" type="checkbox"/> External	Cert. Inspection <input checked="" type="radio"/> Yes <input type="radio"/> No
2 Owner Street Address 507 E 1ST AVE			Owners City STANLEY		State WI	Zip Code 54768	
3 Users Name at Object Location STANLEY BOYD AREA SCHOOL DISTRIC			Specific Location in Plant BOILER ROOM			Object Location - County CHIPPEWA	
3 Users Street Address 507 1ST AVE			Users City STANLEY		State WI	Zip Code 54768	
4 Type <input type="radio"/> FT <input type="radio"/> WT <input type="radio"/> CI <input checked="" type="radio"/> Other				CA BLR	Year Built 2005	Manufacturer PATTERSON	
5 Use <input type="radio"/> Power <input type="radio"/> Process <input type="radio"/> Steam <input checked="" type="radio"/> HWH <input type="radio"/> HWS <input type="radio"/> Other					HWH	Fuel Natural Gas, Burner	Method of Firing
6 Pressure Allowed This inspection: 50					Previous Inspection: 50	Safety Relief Valves Set At: 50	Explain If Pressure Changed
7 Is Condition Of Object Such That a Certificate May Be Issued? <input checked="" type="radio"/> Yes <input type="radio"/> No (If NO, explain fully under conditions)				Hydro Test <input type="radio"/> Yes <input checked="" type="radio"/> No		PSI:	Date: 00/00/0000
8 Conditions: no code violations maintenance personnel are testing safety relief valves. boiler logs are kept at this location.							
9 Requirements: none							
10 Name and Title of Person To Whom Requirements Were Explained TIM TROYER. SUPV. (715) 644-5810							
I hereby Certify this is a true report of my inspection:							
Signature of Inspector  Noreen Oldenburg				Identification No 1124371		Employed by The Hartford Steam Boiler Inspection and Insurance Co.	NB Commission 13403
963 REV. 03/92 (ENG)							

Owner Address Default Conditions
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Standard Form For Jurisdictions Operating Under The ASME Code

Policy **1000022** Location **08486** Designating Number **5**

1 Date Inspected **12/11/2019** Cert Exp Date **11/05/2022** Certificate Posted Yes No Owner Number _____ Jurisdiction Number **WIB0083344** National Board Number _____

2 Owner Name **STANLEY-BOYD AREA SCHOOL DISTRICT** Nature of Business **SCHOOLS (NO COLLEGE)** Kind Of Inspection Internal External Cert. Inspection Yes No

Owner Street Address **507 E 1ST AVE** Owners City **STANLEY** State **WI** Zip Code **54768**

Users Name at Object Location **STANLEY BOYD AREA SCHOOL DISTRICT** Specific Location in Plant **BOILER ROOM** Object Location - County **CHIPPEWA**

3 Users Street Address **507 1ST AVE** Users City **STANLEY** State **WI** Zip Code **54768**

4 Type FT WT CI Other CA BLR Year Built **2005** Manufacturer **PATTERSON**

5 Use Power Process Steam HWH HWS Other HWH Fuel **Natural Gas, Burner** Method of Firing _____ Pressure Gage Test Yes No

6 Pressure Allowed This inspection: **50** Previous Inspection: **50** Safety Relief Valves Set At: **50** Explain If Pressure Changed _____

7 Is Condition Of Object Such That a Certificate May Be Issued? Yes No (If NO, explain fully under conditions) Hydro Test Yes No PSI: _____ Date: **00/00/0000**

8 Conditions:
no code violations maintenance personnel are testing safety relief valves. boiler logs are kept at this location.

9 Requirements:
none

10 Name and Title of Person To Whom Requirements Were Explained
TIM TROYER- SUPV. (715) 644-5810

I hereby Certify this is a true report of my inspection:

Signature of Inspector <i>Noreen Oldenburg</i> Noreen Oldenburg	Identification No 1124371	Employed by The Hartford Steam Boiler Inspection and Insurance Co.	NB Commission 13403
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Owner Address _____ Policy _____ Location _____ Special _____ Default Conditions _____ Default Requirements _____

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Standard Form For Jurisdictions Operating Under The ASME Code

Policy 1000022	Location 08486	Designating Number 6
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1	Date Inspected 12/11/2019	Cert Exp Date 11/30/2022	Certificate Posted <input checked="" type="radio"/> Yes <input type="radio"/> No	Owner Number	Jurisdiction Number WIB0084028	National Board Number
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2	Owner Name STANLEY-BOYD AREA SCHOOL DISTRICT	Nature of Business SCHOOLS (NO COLLEGE)	Kind Of Inspection <input type="checkbox"/> Internal <input checked="" type="checkbox"/> External	Cert. Inspection <input checked="" type="radio"/> Yes <input type="radio"/> No
	Owner Street Address 507 E 1ST AVE	Owners City STANLEY	State WI	Zip Code 54768

3	Users Name at Object Location STANLEY BOYD AREA SCHOOL DISTRICT	Specific Location in Plant BOILER ROOM	Object Location - County CHIPPEWA
	Users Street Address 507 1ST AVE	Users City STANLEY	State WI
			Zip Code 54768

4	Type <input type="radio"/> FT <input type="radio"/> WT <input type="radio"/> CI <input checked="" type="radio"/> Other	CA BLR	Year Built 2007	Manufacturer PATTERSON
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5	Use <input type="radio"/> Power <input type="radio"/> Process <input type="radio"/> Steam <input checked="" type="radio"/> HWH <input type="radio"/> HWS <input type="radio"/> Other	HWH	Fuel Natural Gas, Burner	Method of Firing	Pressure Gage Test <input type="radio"/> Yes <input checked="" type="radio"/> No
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6	Pressure Allowed This inspection: 50	Previous Inspection: 50	Safety Relief Valves Set At: 50	Explain If Pressure Changed
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7	Is Condition Of Object Such That a Certificate May Be Issued? <input checked="" type="radio"/> Yes <input type="radio"/> No (If NO, explain fully under conditions)	Hydro Test <input type="radio"/> Yes <input checked="" type="radio"/> No	PSI:	Date: 00/00/0000
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8

Conditions:
no code violations maintenance personnel are testing safety relief valves. boiler logs are kept at this location.

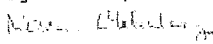
9

Requirements:
none

10

Name and Title of Person To Whom Requirements Were Explained
TIM TROYER- SUPV. (715) 644-5810

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Owner Address Default Conditions
 Policy Location Special Default Requirements