

CSD-1 Certification and Reporting

The following Certification and reporting is required for all boilers installed in Arizona on or after January 1, 1992 unless excluded by ASME, CSD-1-2007. Reports required in the paragraphs below must be submitted to the Chief Boiler Inspector at the following address by fax or mail.

The Industrial Commission of Arizona
Boiler Safety Section
PO Box 19070
Phoenix, AZ 85005-9070
Fax 602-542-1614

CG-510 Certification and Reporting

- a. Manufacturers of shop-assembled boiler units covered by this Standard shall maintain a report for each boiler unit or on each category (type, size, or model) for boiler units. For boiler units less than or equal to 400,000 Btu/hr (117 kW) for gas, or less than or equal to 3 gph (11.4 L/h) for oil, a report shall be maintained on each category (type, size, or model).

This report shall list:

1. each control and safety device installed in accordance with this standard
2. name of the manufacturer and model number of each control and safety device
3. operational test performed (see CG-440)

CG-510(a)(1) through (3) shall be verified by the signature of an authorized representative of the manufacturer on this report.

- b. Installing contractors shall maintain or obtain from the manufacturer a report for each installation completed. The report shall list:
1. each device installed in accordance with this standard
 2. name of the manufacturer and model number of each control and safety device
 3. operational test performed (see CG-440)

CG-510(b)(1) through (3) shall be verified by the signature of an authorized representative of the installing contractor on this report. An example of an acceptable report is attached. Manufactures/Installing Contractor's other forms as appropriate.

This report shall be made available to the authorized inspection agency or the inspector for action as required by the local jurisdiction.

- c. Installing contractors shall obtain from the boiler manufacturer pertinent operating, testing, servicing, and cleaning instructions for the controls and safety devices (see CG-410, CG-420, and CG-430). It is the responsibility of the installing contractor to deliver these instructions, together with complete wiring and piping diagrams, and a written precaution that the operating, testing, and servicing only be performed by qualified personnel, to the owner/user and to obtain a receipt for the instructions. The receipt shall be filed with the installation report.

Instructions for filling out the ASME CSD-1 Manufacturer's/Installing Contractors Report

Block Information to be filled in

1. Manufacturer's name (*located on ASME plate or manufacturer's data report*)
2. Manufacturer's address, street, City, State
3. Manufacturer's Zip Code
4. Manufacturer's Phone Number
5. Manufacturer's Fax Number (*if available*)
6. Manufacturer's Model Number (*from the unit or manufacturer's manual*)
7. Year the unit was built (*from ASME plate*)
8. National Board Number (*located at top of ASME name plate*)
9. Serial Number of the unit (*from ASME nameplate or manufacturer's data report*)
10. Underwriter's Laboratory Number (*if available*)
11. Canadian Standards Association Number (*if available*)
- (*Items 12 and 13 are for Steam boilers only*)
12. Maximum Allowable Working Pressure (*from ASME plate*)
13. Minimum Safety Valve relieving capacity required (*from ASME plate*)
- (*Items 14-16 for water boilers only N/A for steam boilers*)
14. Maximum Allowable Working Pressure (*from ASME plate*)
15. Maximum Allowable Temperature (*from ASME plate*)
16. Minimum Safety Valve relieving capacity required (*from ASME plate*) (*circle PPH or Btu as applicable*)
17. Boiler Type (*i.e. Cast Iron, Water Tube, Fire Tube etc.*)
18. Square feet of heating surface (*from ASME plate*)
19. Total Btu/hr input capacity
20. Total Btu/hr output capacity
21. If modular boiler, number of modules
22. Burner manufacturer (*if available*)
23. Burner Model Number (*if available*)
24. Underwriter's Laboratory No. or Canadian Standards Association No. (*if available*)
25. Burner Serial Number (*if available*)
26. Type of fuels connected to the burner assembly to be used. (*i.e. natural gas, oil, propane etc.*)
27. Gas manifold pressure (*for natural, propane etc.*)
28. High gas pressure switch setting (*if switch is installed*)
29. Low gas pressure switch setting (*if switch is installed*)
30. Oil pressure at the nozzle (*for oil burners only*)
31. Low oil pressure switch setting (*if applicable*)
32. Kilowatt input (*electric boilers only*)
33. Elements or Electrodes (*electric boilers only*)
34. Number of elements or electrodes (*electric boilers only*)
35. Owner/Users name for where the boiler will be installed
36. Owner/Users street address for where the boiler will be installed
37. Owner/Users city for where the boiler will be installed
38. Owner/Users Zip Code for where the boiler will be installed
39. Owner/Users Telephone number for where the boiler will be installed
40. Owner/Users Fax number for where the boiler will be installed (*if available*)
41. email address for contact (*if available*)
42. Actual Manufacturer's Name for each control/device listed that is installed on the boiler
43. Manufacturer's model number for each control/device listed that is installed on the boiler
44. Date the operational test was performed to check the control/device listed at manufacturer's facility (*note: the paragraph number under the name of the control/device is the CSD-1 paragraph that list the requirements must meet and its function*) *All installations shall have an operational test performed by both the manufacturer and installing contractor's representative.*
45. Date the operational test was performed to check the control/device listed at place of installation
46. Safety or safety relief valve manufacturer (*SV or SRV*)
47. Operational test of SV or SRV (*date performed*)
48. Model of pressure relieving device or devices
49. SV or SRV inlet & outlet size (*i.e. 2"x3"*)
50. SV or SRV Capacity (*circle PPH/Btu as appropriate*)
51. Name of individual representing the equipment manufacturer
52. Signature of authorized representative of the manufacturer
53. Date signed authorized representative of the manufacturer
54. Name of the Installing Contractor
55. Signature of the Installing Contractor's representative
56. Date signed by Installing Contractor's representative



State of Arizona Boiler Safety Section

MANUFACTURER'S/INSTALLING CONTRACTORS REPORT FOR ASME CSD-1

Unit Manufacturer

Name _____ (1) Address _____ (2) Zip _____ (3)
Telephone _____ (4) Fax _____ (5)

Unit Identification (Boiler)

Manufacturer's Model # _____ (6) Year Built _____ (7)
National Board # _____ (8) Serial # _____ (9) UL # _____ (10) CSA # _____ (11)
Jurisdiction _____ State of Arizona

Steam

Hot Water

Maximum Working Pressure _____ (12) psig Maximum Working Pressure _____ (14) psig Maximum Temperature _____ (15) °F
Minimum Safety Valve Capacity _____ (13) PPH Minimum Safety Relief Valve Capacity _____ (16) BTU or PPH

Boiler Unit Description (type) _____ (17) Square Foot Heating Surface (cast iron & aluminum exempt) _____ (18)

Boiler Unit Capacity (input/output) _____ (19) / _____ (20) If Modular (number of modules) _____ (21)

Burner

Manufacturer _____ (22) Model _____ (23)
UL or CSA # _____ (24) Serial # _____ (25)

Fuels (as shipped) _____ (26)

Indicate Units (where not applicable, indicate "N/A")

Gas Manifold Pressure _____ (27) High Gas Pressure Switch Setting _____ (28) Low Gas Pressure Switch Setting _____ (29)
Oil Nozzle/Delivery Pressure (at maximum input) _____ (30) Low Oil Pressure Switch Setting _____ (31)
Kilowatt Input _____ (32) Type (elements or electrode) _____ (33) Number of Elements or Electrodes _____ (34)

Installation Location (if known)

Customer Name _____ (35)
Address _____ (36)
City _____ (37) State _____ Arizona _____ Zip _____ (38)
Telephone _____ (39) Fax _____ (40) Email _____ (41)

Certification and Reporting (CG-500) for Controls and Safety Devices (Cont'd)

Control Device	Operational Test Performed, Date		
	Manufacturer	Model #	Manufacturer / Installing Contractor
Operating Controls			
Low Water Fuel Cutoff CW-120(a), CW-140	42	43	44 / 45
Forced Circulation CW-210(a)			/
Steam Pressure CW-310(b)			/
Water Temperature CW-410(b)			/
Safety Controls			
Low Water Fuel Cutoff CW-120(a), CW-120(b) CW-130, CW-140			/
Forced Circulation CW-210(b)			/
High Steam Pressure Limit CW-310@			/
High Water Temperature Limit CW-410@			/
Fuel Safety Shutoff Valve, Main CF-180(b)(2), CF-180(b)(3)			/
Pilot Safety Shutoff Valve CF-180@			/
Atomizing Medium Switch CF-450(b)			/
Combustion Air Switch CF-220			/
High Gas Pressure CF-162			/
Low Gas Pressure CF-162			/
Low Oil Pressure CF-450(a)			/
High Oil Temperature CF-450(c)			/
Low Oil Temperature CF-450(d)			/
Purge Air Flow CF-210			/
Flame Safeguard (Primary) CF-310, CF-320			/
Flame Detector CF-310, CF-320			/
Low Fire Start Low-Fire Start Switch CF-610	↓	↓	↓ / ↓

Certification and Reporting (CG-500) for Controls and Safety Devices (Cont'd)

Safety or Safety Relief Valve, CW-510, CW-520 (if more than one valve, list all SV or SRV below)

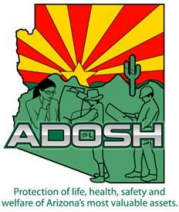
Manufacturer _____ (46) Operational Test Performed, Date _____ (47) / _____ / _____
Model (s) _____ (48)
Size (s) _____ (49)
Capacity (s) _____ (50) PPH/Btu/hr

Representing Equipment Manufacturer, Name _____ (51)

Signature _____ (52) Date _____ (53)

Representing Installing Contractor, Name _____ (54)

Signature _____ (55) Date _____ (56)



State of Arizona Boiler Safety Section

MANUFACTURER'S/INSTALLING CONTRACTORS REPORT FOR ASME CSD-1

Unit Manufacturer

Name _____ Address _____ Zip _____
Telephone _____ Fax _____

Unit Identification (Boiler)

Manufacturer's Model # _____ Year Built _____
National Board # _____ Serial # _____ UL # _____ CSA # _____
Jurisdiction _____ State of Arizona

Steam

Maximum Working Pressure _____ psig
Minimum Safety Valve Capacity _____ PPH

Hot Water

Maximum Working Pressure _____ psig Maximum Temperature _____ °F
Minimum Safety Relief Valve Capacity _____ BTU or PPH

Boiler Unit Description (type) _____ Square Foot Heating Surface (cast iron & aluminum exempt) _____

Boiler Unit Capacity (input/output) _____ / _____ If Modular (number of modules) _____

Burner

Manufacturer _____ Model _____
UL or CSA # _____ Serial # _____

Fuels (as shipped) _____

Indicate Units (where not applicable, indicate "N/A")

Gas Manifold Pressure _____ High Gas Pressure Switch Setting _____ Low Gas Pressure Switch Setting _____
Oil Nozzle/Delivery Pressure (at maximum input) _____ Low Oil Pressure Switch Setting _____
Kilowatt Input _____ Type (elements or electrode) _____ Number of Elements or Electrodes _____

Installation Location (if known)

Customer Name _____
Address _____
City _____ State _____ Arizona _____ Zip _____
Telephone _____ Fax _____ Email _____

Certification and Reporting (CG-500) for Controls and Safety Devices (Cont'd)

Control Device	Manufacturer	Model #	Operational Test Performed, Date
			Manufacturer / Installing Contractor
Operating Controls			
Low Water Fuel Cutoff CW-120(a), CW-140	_____	_____	_____/_____
Forced Circulation CW-210(a)	_____	_____	_____/_____
Steam Pressure CW-310(b)	_____	_____	_____/_____
Water Temperature CW-410(b)	_____	_____	_____/_____
Safety Controls			
Low Water Fuel Cutoff CW-120(a), CW-120(b) CW-130, CW-140	_____	_____	_____/_____
Forced Circulation CW-210(b)	_____	_____	_____/_____
High Steam Pressure Limit CW-310(c)	_____	_____	_____/_____
High Water Temperature Limit CW-410(c)	_____	_____	_____/_____
Fuel Safety Shutoff Valve, Main CF-180(b)(2), CF-180(b)(3)	_____	_____	_____/_____
Pilot Safety Shutoff Valve CF-180(c)	_____	_____	_____/_____
Atomizing Medium Switch CF-450(b)	_____	_____	_____/_____
Combustion Air Switch CF-220	_____	_____	_____/_____
High Gas Pressure Switch CF-162	_____	_____	_____/_____
Low Gas Pressure Switch CF-162	_____	_____	_____/_____
Low Oil Pressure Switch CF-450(a)	_____	_____	_____/_____
High Oil Temperature Switch CF-450(c)	_____	_____	_____/_____
Low Oil Temperature Switch CF-450(d)	_____	_____	_____/_____
Purge Air Flow CF-210	_____	_____	_____/_____
Flame Safeguard (Primary) CF-310, CF-320	_____	_____	_____/_____
Flame Detector CF-310, CF-320	_____	_____	_____/_____
Low Fire Start			
Low-Fire Start Switch CF-610	_____	_____	_____/_____

Certification and Reporting (CG-500) for Controls and Safety Devices (Cont'd)

Safety or Safety Relief Valve, CW-510, CW-520 (if more than one valve, list all SV or SRV below)

Manufacturer _____ Operational Test Performed, Date _____/_____/_____

Model (s) _____

Size (s) _____

Capacity (s) _____ PPH/Btu/hr

Representing Equipment Manufacturer, Name _____

Signature _____ Date _____

Representing Installing Contractor, Name _____

Signature _____ Date _____