



MANUFACTURER'S/INSTALLING CONTRACTOR'S REPORT FOR MEETING THE REQUIREMENTS FOR ASME CSD-1 (CG500)

UNIT MANUFACTURER

Name _____

Address _____ City/State _____ Zip _____

Telephone _____ Fax _____

UNIT IDENTIFICATION (Boiler)

Manufacturer's Model # _____ Year Built _____

ASME # _____ Nat. Bd. # _____

UL # _____ AGA # _____

OK # _____

STEAM

Max. W.P. _____ psig

Min. Safety Valve Cap. _____ PPH

HOT WATER

Max. W.P. _____ psig

Max. temp. _____ deg. F

Min. Safety Relief Valve Cap. _____ PPH or Btu

BOILER UNIT DESCRIPTION (TYPE)

If Modular (No. of Modules) _____

BOILER UNIT CAPACITY (OUTPUT)

Burner - Manufacturer _____ Model _____

UL or AGA # _____ Serial _____

FUELS (as shipped) _____

INSTALLATION LOCATION (if known)

Customer Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

Control/Device	Manufacturer	Model #	Operational Test Performed, Date
<u>OPERATIONAL CONTROLS</u>			
Low-Water Fuel Cutoff CW-120(a), CW-140	_____	_____	_____
Forced Circulation CW-210(a)	_____	_____	_____
Steam Pressure CW-310(b)	_____	_____	_____
Water Temperature CW-410(b)	_____	_____	_____

Control/Device	Manufacturer	Model #	Operational Test Performed, Date
<u>SAFETY CONTROLS</u>			
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-400(c)	_____	_____	_____
Fuel Safety Shutoff Valve, 1 CF-180	_____	_____	_____
Fuel Safety Shutoff Valve, 2 CF-180	_____	_____	_____
Pilot Safety Shutoff Valve, 1 CF-180(c)	_____	_____	_____
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	_____	_____	_____
<u>LOW FIRE START</u>			
Low Fire Start Switch CF-610	_____	_____	_____

SAFETY OR SAFETY RELIEF VALVE(S)

OPERATION TEST PERFORMED, DATE

CW-510, CW-520

Manufacturer _____
 Model _____
 Size _____
 Capacity _____ PPH/Btu/hr

 Representing Equipment Manufacturer, Name _____
 Signature _____
 Date _____

 Representing Installing Contractor, Name _____
 Signature _____
 Date _____ License # _____