UTAH LABOR COMMISSION

Division of Boiler, Elevator and Coal Mine Safety 160 East 300 South, 3rd Floor PO Box 146620 Salt Lake City, Utah 84114-6620 (801) 530-6850 (801) 530-6871 Fax



Federal Inspection Request and Authorization Form

The service requested has been determined by the Utah Labor Commission, Division of Boiler, Elevator and Coal Mine Safety to be a Federal Inspection. There are additional fees associated with these services. These fees are separate and additional to any certificate fees that will be assessed for the pressure vessel/boiler/elevator certificate. The party listed below, which will be invoiced for these services, must authorize and/or request the inspection. The following list enumerates the charges that could apply if these services are performed. By signing this form you acknowledge the following:

- There will be a charge of \$60.00 per hour for travel time, with a one hour minimum. Each additional hour and fraction of an hour will be billed in half hour increments.
- There will be a charge of \$60.00 per hour for inspection time, with a one hour minimum. Each additional hour and fraction of an hour will be billed in half hour increments.
- The inspection and travel time charges are in addition to the Certificate of Inspection and Permit to Operate fees. These fees are charged as follows:
 - O Pressure Vessels are charged at \$45.00 for new units and \$30.00 for existing units.
 - O Boiler permit fees vary based on the btu input of the unit, a full listing of these fees can be found in our Boiler/Pressure Vessel Compliance Manual online at www.laborcommission.utah.gov.
 - O Elevators are charged \$85.00 for existing units, new units are charged based on the type of elevator, a full listing of these fees can be found in our Elevator Compliance Manual online at www.laborcommission.utah.gov.
 - **&** Be Advised In order to receive a Certificate of Inspection and Permit to Operate the unit must meet all applicable State of Utah Code requirements.

I understand that the company listed as "Party to be Invoiced" will be responsible for any and all charges incurred due to the services requested. I further represent that I am authorized to incur these charges on behalf of the company listed as the "Party to be Invoiced." I authorize the services to be performed at the location listed below.

Authorized Signature	_ Date		
Party to be Invoiced:	Billing Contact Name:		Phone Number:
Billing Address:	City:	State:	Zip Code:
Type of items to be inspected: ☐ Pressure Vessels ☐ Boilers ☐	rs Elevators Number of items to be		e inspected:
Name of Physical Location of item(s) to be inspected:			County:
Physical Address of item(s) to be inspected:	City:		Zip Code:
State Number(s) (If applicable)	Number of Units to be Inspected:		
Name of Contact:	Title:		Phone: