



# Boiler/Pressure Vessel/Water Heater Installation or Reinstallation Permit

Boiler Section  
 PO Box 44410  
 Olympia WA 98504-4410  
 Phone: 360-902-6400  
 Email: Boiler@Lni.wa.gov  
[www.Lni.wa.gov](http://www.Lni.wa.gov)  
[Link to form instructions](#)

**Submit one permit for each object installed.  
 Installer responsible for permit fee of \$66.00**

<b>For L&amp;I Use Only – Permit Number: _____</b> <b>Invoice Number: _____</b>
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## Section A. Installer applying for permit completes this section only.

1. Installer Permit Billing Info	2. Owner	3. Location of Installation
Name	Name	Name
Street Address	Street Address	Street Address
City, State, Zip Code	City, State, Zip Code	City, State, Zip Code
Contact Name/Title	Contact Name/Title	Contact Name/Title
Office Number	Phone Number	Phone Number
Cell Number	Cell Number	Cell Number
Email Address	Email Address	Email Address
4. Contractor Registration #	5. Type — <input type="checkbox"/> Boiler <input type="checkbox"/> Pressure Vessel <input type="checkbox"/> Water Heater	6. Location in Building
I certify that I will perform the work described above in accordance with: Boiler and Unfired Pressure Vessel Laws RCW 70.79 and WAC 296 Chapter 104.		
7. Installer Signature* <small>*Not required if submitted electronically</small>		8. Installer Printed Name
		9. Date

## Section B. L&I Boiler Section Use Only

Date Permit Issued	Assigned Inspector	Authorized Inspection Agency	Phone Number
Verified By	Comments/Special Instructions		

## Section C. Assigned Inspector Use Only

Jurisdiction #	Date of Inspection	Inspection Type <input type="checkbox"/> Ext <input type="checkbox"/> Int	Issue Cert. <input type="checkbox"/> Yes <input type="checkbox"/> No	NCR <input type="checkbox"/> Yes <input type="checkbox"/> No	Certificate Duration <input type="checkbox"/> 12 mo <input type="checkbox"/> 24 mo
Manufacturer		National Board #	Serial/Other Number		ASME/Other Symbol
Specific Location of Object			Type of Object		
Fuel Type	Input (BTU/KW)	Year Build	Object Use		
MAWP	Max Temp	MDMT	Vessel Size (Sq Ft/HS)	Number of SV	SV Pressure
Inspector's Name			Inspector's Signature		WA Commission Number
Comments:					