

**ARKANSAS DEPARTMENT OF LABOR
BOILER INSPECTION DIVISION
10421 WEST MARKHAM
LITTLE ROCK, ARKANSAS 72205**

APPLICATION FOR REPAIR/ALTERATION PERMIT

BOILERS

STATE #	SERIAL #	N. B. #	OWNER OR USER	LOCATION

UNFIRED PRESSURE VESSELS

STATE #	SERIAL #	N.B. #	OWNER OR USER	LOCATION

TYPE OF REPAIR – REMARKS

SUBMITTED BY: _____
(NAME)
(ADDRESS)
(ST. LIC. #)

SIGNED BY: _____
(NAME)
(TITLE)
(DATE)

A COMPLETED NATIONAL BOARD R-1 WELDED REPAIR FORM MUST BE FORWARDED TO THE BOILER INSPECTION DIVISION AFTER REPAIRS ARE MADE.

ALL WELDING MUST BE PERFORMED BY ASME SECTION IX QUALIFIED WELDERS ONLY