

South Carolina Department of Labor, Licensing and Regulation

South Carolina Boiler Safety Program 110 Centerview Dr. • Columbia • SC • 29210

P.O. Box 11329 • Columbia • SC 29211-1329
Phone: 803-896-4686 • contact.clb@llr.sc.gov • Fax: 803-896-4814
llr.sc.gov/boil

BOILER SAFETY PROGRAM REVISION APPLICATION Document 250

Instructions/Requirements:

- No fee is required for this application.
- List the most current information below. Your records will be updated according to this application.
- If your employer has changed, please provide proof of employment (i.e. Verification of employment letter, W-2, etc.).

INSPECTOR INFORMATION

Inspector Name:			License No:			
Mailing Address:						
Street		(City	State	Zip	
Phone No.:		Fax No.:				
Email Address:						
Commission No: NB	Date of Birth:					
f commissioned by another source, ple	ease list the na	ame and license numb	er of the s	ource:		
Source	Certification Number					
EMPLOYER/COMPANY INFORM	ATION					
Employer/Company Name:						
Employer/Company Address:						
	Street	(City	State	Zip	
Employer/Company Phone No.:		Employer/Comp	any Fax N	No.:		
Employer/Company Email Address:						
PERSONAL HISTORY QUESTION If you answer "Yes" to any of the below supporting documentation.		blease attach a detailed	l written e	explanation alo	ng with any	
Have you legally changed your name, i	ncluding mar	riage or divorce?		Yes	No	
Since your certification, has there been presence in the United States?	any change in	n the status of your la	wful	Yes	No	
Signature of Commissioned Inspector			Date			