PERMIT TO MOVE BOILER OR UNFIRED PRESSURE VESSEL (UPV)

A copy of the Manufacturer's Data Report must be submitted with this form.
Please type or print legibly.

<table>
<thead>
<tr>
<th>Applicant (Contact Person)</th>
<th>Contact Person</th>
<th>Company Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Street No. &amp; Name</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<table>
<thead>
<tr>
<th>Telephone No.</th>
<th>FAX No.</th>
</tr>
</thead>
<tbody>
<tr>
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<table>
<thead>
<tr>
<th>E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Former Owner Name</th>
<th>Former Location</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Last Inspection (for former owner)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Owner's Identification Number</th>
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</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Manufacturer's Number</th>
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</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Pennsylvania Standard Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>National Board Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Other State Standard Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>ASME Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Is object stamped with ASME symbol?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Yes                  □ No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type of Object</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Construction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Built by</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>New Owner Name</th>
<th>New Location</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Will object be insured?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Yes                  □ No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If Yes, by what company?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Applicant Signature</th>
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<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td></td>
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</table>

FOR BOILER DIVISION USE ONLY

<table>
<thead>
<tr>
<th>□ Approved</th>
<th>□ Disapproved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Boiler Division Supervisor Signature</th>
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<table>
<thead>
<tr>
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LIBI-301 REV 9-06
COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF LABOR & INDUSTRY