



Colorado Department of Labor and Employment
Division of Oil and Public Safety – Boiler Inspection Program
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CHANGE OF OWNERSHIP/ADDRESS FORM BOILERS AND PRESSURE VESSELS

(REVISED 6/2014)

When an ownership or address change has occurred, please complete this form and promptly submit it to us via email to catherine.johnson@state.co.us or by mailing it to the address listed above so that we may update our records accordingly. Please contact us if you have any questions.

Jurisdiction Number(s):

Previous Owner and/or Responsible Party Name(s):

Boiler/ Pressure Vessel Location	Building Name:	
	Street Address:	
	City/State/ZIP:	
	County:	
	Contact Name:	
	Phone Number:	
	Fax Number:	
	Email Address*:	
Current Owner	Company Name:	
	Mailing Address:	
	City/State/ZIP:	
	Contact Name:	
	Phone Number:	
	Fax Number:	
	Email Address*:	
Responsible Party	Company Name:	
	Mailing Address:	
	City/State/ZIP:	
	Contact Name:	
	Phone Number:	
	Fax Number:	
	Email Address*:	

*Please provide current email addresses for each contact so that we may communicate with you more efficiently.