BOILER TAG REQUEST FORM

Inspector Information:		
Name:	Date:	
License Number:		
Agency:		
Email Address:		
Phone:		
Amount being requested: 50 □100 □		
Method of Delivery: Mail 🗆 Pick up at main office 🗆		

MAILING ADDRESS:	Date & Time for Pick up: (please allow 24 hours' notice of your request)

All requests for Boiler tags should be emailed directly to:

Samantha.Martinez@arkansas.gov

Please be advised, if you wish to pick tags up at our office located at 900 West Capitol Ave, Suite 400 in Little Rock 72201, we will need 24 hours advanced notice to complete your request. Our office is open from 8:00am – 4:30pm Monday through Friday.

FOR OFFICE USE ONLY:	
Beginning Tag number:	Ending Tag Number:
Issuer of Tags:	Date:
Activated in Focus: 🗆	