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GUERNSEY STATUTORY INSTRUMENT

1957 - No. 1

The Steam Boilers (Insurance) Regulations, 1957

Made ... .. 26th February, 1957  
Coming into Operation ... .. 1st March, 1957

The States Labour and Welfare Committee, in pursuance of the powers conferred on it by the Steam Boilers (Insurance) Ordinance, 1952, hereby makes the following Regulations:

Interpretation

1. (1) The Interpretation (Guernsey) Law, 1948, shall apply to the interpretation of these Regulations as it applies to the interpretation of an enactment.

(2) In these Regulations the expression "the Ordinance" means the Steam Boilers (Insurance) Ordinance, 1952.

Notice of explosion

2. For the purposes of section five of the Ordinance the form of written notice of an explosion to which the Ordinance applies shall be Form 1B set out in the Schedule to these Regulations and the prescribed particulars shall be those mentioned on the said Form 1B.

Citation and commencement

3. These Regulations may be cited as the Steam Boilers (Insurance) Regulations, 1957, and shall come into operation of the first day of March, nineteen hundred and fifty-seven.

Dated this twenty-sixth day of February, nineteen hundred and fifty-seven.

*C. E. Bricquet*

President,  
of the States Labour and Welfare Committee  
for and on behalf of the Committee.

STATES OF GUERNSEY

Notice of an explosion of a steam boiler  
pursuant to section five of  
THE STEAM BOILERS (Insurance) ORDINANCE, 1952

Prescribed form of notice of an explosion of a steam boiler to be sent to the States Labour and Welfare Committee, St. Paul's, forthwith on the occurrence of the explosion.	(For Official Use)
	Date of receipt _____
	File No. _____
	Industry _____
	Other references _____

Name of Owner \_\_\_\_\_

Address of owner \_\_\_\_\_

Address where explosion occurred \_\_\_\_\_

Name and address of person operating the steam boiler, if that person is not the owner \_\_\_\_\_

Nature of trade, industry or calling in connection with which the steam boiler is used \_\_\_\_\_

Type of boiler and distinctive number \_\_\_\_\_

Fuel used for generation of steam \_\_\_\_\_

Cause of explosion (if known) \_\_\_\_\_

Date and hour of explosion \_\_\_\_\_

Persons injured (if any):-

Name	Age	Address

Nature of injuries \_\_\_\_\_

Remarks (if any) \_\_\_\_\_

Signature of owner \_\_\_\_\_

Date \_\_\_\_\_