Elevator Inspection & Testing

To be used in conjunction with Elevator Contractors documentations of acceptance testing.

BUILDING: ____________________________________________

PROJECT #:  KU________ A-________ ENGINEER OF RECORD: __________________________

INSPECTING:

1 (Contractor)  4 ( )
2 (AHJ )  5 ( )
3 (Owner )  6 ( )

FILL OUT ONE SHEET FOR EACH ELEVATOR CAR INSPECTED
CHECK SYSTEMS TESTED and or INSPECTED, list deficiencies below: Please date when appropriate

☐ DATE:_____/_____/_____ Engineer of Record inspected and approved:______________

☐ ELEVATOR NO: ___________ TYPE:______________

☐ DATE:_____/_____/_____ Drop or Load Test

Car rating: __________ Test weight: __________ Date:________

Witnessed by: _________________By:______________

☐ Visual inspect all components of system, required clearances, door safeties, drop safeties.

☐ Shaft inspected, rating maintained- all penetrations grouted or caulked, no unassociated items.

☐ All tracks clean, top of elevator clean, no protrusions into shaft.

☐ Sprinkler at top of shaft (hydraulic only)- _________, Smoke and or heat detector at top- _________.

☐ Pit inspected, Service light-___, ladder-___, system shut off-___, sprinkler head (hydraulic only)-___.

☐ Sump pit-_______, Water alarm-_______, Oil interceptor in place (hydraulic only)-_______.

☐ Fireman’s I & II recall-________, Tested-________ Primary Floor-_____ Secondary -_____.

☐ Signage in place “Use Stairs in case of Fire”-_______, Emergency phone tested-_______(864-5926).

☐ Elevator equipment room- fire rated-_______, Shut off-_______, No shunt trip installed-_______.

☐ Other____________________________________________

COMMENTS: (Punch list deficiencies and items to be added to comply with code)