



Elevator and Amusement Ride Division

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Traction Elevator Safety Test

General Information

| | | | | | |
|---|--------|---------------|---|----------------|---|
| Building Name: | | Manufacturer: | | State ID #: | |
| Address: | | City: | | ZIP: | |
| Responsible Party Name: | | Phone: | | Email: | |
| Install Date: | Stops: | Front | Rear | Capacity: | lbs |
| Rated Speed: | fpm | Duty: | <input type="checkbox"/> Passenger <input type="checkbox"/> Freight | Freight Class: | <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> C3 |
| Test Date: | | Test Type: | <input type="checkbox"/> Acceptance <input type="checkbox"/> Category 1 <input type="checkbox"/> Category 5 <input type="checkbox"/> Construction use | | |
| Inspector Present? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes, Inspector Signs Report</i> | | | Alternative Testing Method Used (if applicable): | | |

Testing and Inspection Components

One of the two boxes must be checked to indicate code compliance (OK = code compliance and N/A = not applicable)

^{TCO} = TCO (up to 60 days) can be recommended in lieu of shutdown (TCO is NOT allowed at acceptance)

CATEGORY 1 Test Items:

| | | | |
|---|---|--|---|
| OK N/A | OK N/A | OK N/A | OK N/A |
| <input type="checkbox"/> <input type="checkbox"/> Rope: under-sized/wear ^{TCO} | Safety Type: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C | <input type="checkbox"/> <input type="checkbox"/> Limits: dir & final: up & down | <input type="checkbox"/> <input type="checkbox"/> Phase I Recall operation ^{TCO} |
| <input type="checkbox"/> <input type="checkbox"/> Rope: residual strength det | <input type="checkbox"/> <input type="checkbox"/> Safety: Car (no load-slow sp) | <input type="checkbox"/> <input type="checkbox"/> Limits: Emerg Term Stop | <input type="checkbox"/> <input type="checkbox"/> Phase II operation ^{TCO} |
| <input type="checkbox"/> <input type="checkbox"/> Rope: slack rope device | <input type="checkbox"/> <input type="checkbox"/> Safety: CW (no load-slow sp) | <input type="checkbox"/> <input type="checkbox"/> Limits: Norm Term Slow | <input type="checkbox"/> <input type="checkbox"/> Phase I & II signage |
| <input type="checkbox"/> <input type="checkbox"/> Rope: Broken member det | <input type="checkbox"/> <input type="checkbox"/> Safety: Car out of level | <input type="checkbox"/> <input type="checkbox"/> Door: closing force (≤ 30) ^{TCO} | <input type="checkbox"/> <input type="checkbox"/> SIL: functionality |
| <input type="checkbox"/> <input type="checkbox"/> Buffer data plate ^{TCO} | <input type="checkbox"/> <input type="checkbox"/> Traction-loss det | <input type="checkbox"/> <input type="checkbox"/> Door: electric or safety edge | <input type="checkbox"/> <input type="checkbox"/> SIL: written checkout proc |
| <input type="checkbox"/> <input type="checkbox"/> Buffer (oil): car return (90 s) | <input type="checkbox"/> <input type="checkbox"/> Escape hatch contact | <input type="checkbox"/> <input type="checkbox"/> Door: restrictors ^{TCO} | <input type="checkbox"/> <input type="checkbox"/> 2-way communication ^{TCO} |
| <input type="checkbox"/> <input type="checkbox"/> Buffer (oil): CW return (90 s) | <input type="checkbox"/> <input type="checkbox"/> Stop Switches: | <input type="checkbox"/> <input type="checkbox"/> Door: interlock-gate switch | <input type="checkbox"/> <input type="checkbox"/> Mech-visual operation |
| <input type="checkbox"/> <input type="checkbox"/> Gov: manual operation | pit - MRm - car - cartop | <input type="checkbox"/> <input type="checkbox"/> Ascending over-sp (no load) | <input type="checkbox"/> <input type="checkbox"/> Test tags installed ^{TCO} |
| | | <input type="checkbox"/> <input type="checkbox"/> Unintended mvmt (no load) | <input type="checkbox"/> <input type="checkbox"/> E-Power (125% RL-accept only) |

CATEGORY 5 Test Items: All Category 1 items and items below (RL = rated load, RS = rated speed)

| | | | |
|---|---|---|--|
| <input type="checkbox"/> <input type="checkbox"/> Gov: trip speed | <input type="checkbox"/> <input type="checkbox"/> Safety: car (RL+RS) | <input type="checkbox"/> <input type="checkbox"/> Buffer: car (RL+RS) | <input type="checkbox"/> <input type="checkbox"/> Brake: hold (125% RL) |
| <input type="checkbox"/> <input type="checkbox"/> Gov: adjustments sealed | <input type="checkbox"/> <input type="checkbox"/> Safety: CW (no load+RS) | <input type="checkbox"/> <input type="checkbox"/> Buffer: CW (no load+RS) | <input type="checkbox"/> <input type="checkbox"/> Brake: e-stop (125% RL+RS) |
| <input type="checkbox"/> <input type="checkbox"/> Gov: rope pull-thru | <input type="checkbox"/> <input type="checkbox"/> Safety: rail-slide | <input type="checkbox"/> <input type="checkbox"/> Leveling zone & speed | <input type="checkbox"/> <input type="checkbox"/> E-Brake |

INSPECTION Items: Inspect all items in Category 1 and 5 lists and items below

| | | | |
|--|--|--|---|
| <input type="checkbox"/> <input type="checkbox"/> Rope: susp means ^{TCO} | <input type="checkbox"/> <input type="checkbox"/> Elec: wire connections tight | <input type="checkbox"/> <input type="checkbox"/> In-car: alarm Bell & e-lights | <input type="checkbox"/> <input type="checkbox"/> Other switches |
| <input type="checkbox"/> <input type="checkbox"/> Rope: susp monitoring ^{TCO} | <input type="checkbox"/> <input type="checkbox"/> Elec: jumpers removed | <input type="checkbox"/> <input type="checkbox"/> Door: retainers ^{TCO} | <input type="checkbox"/> <input type="checkbox"/> Keys available ^{TCO} |
| <input type="checkbox"/> <input type="checkbox"/> MCP complete ^{TCO} | <input type="checkbox"/> <input type="checkbox"/> Elec: proper fuses used | <input type="checkbox"/> <input type="checkbox"/> Door: guides (gibs) | <input type="checkbox"/> <input type="checkbox"/> MR-cartop-controller clean |

| Inspector's Violation Description and/or Mechanic's Test Result Comment | Shut-Down | TCO (60 days) | Correction Date (Inspector only) |
|---|--------------------------|--------------------------|----------------------------------|
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |

Result: ☐ Annual CO ☐ Temporary CO ☐ Construction CO

Certifications

By signing below, I certify that all statements are true to the best of my knowledge and that all testing and test witnessing was performed according to current Conveyance Regulations and the appropriate edition of ASME A17.1 Sections 8.6, 8.10 and 8.11.

| | | | |
|----------------------|--|--------------------------|------------------|
| Mechanic Name: | | Contractor Company Name: | |
| Mechanic Signature: | | Date: | State License #: |
| Inspector Name: | | | |
| Inspector Signature: | | Date: | QEI #: |