



Category 5 Hydraulic Elevator Periodic Test Record
ASME A17.1 Sections 8.6.5.16

Building Name:		Address:		City, State, Zip:	
Owners Name:		Address:		City, State, Zip:	
State Number: NV		Type: Freight: <input type="checkbox"/> Passenger: <input type="checkbox"/>		Class:	
Running Speed: (Up) fpm		Running Speed: (Down) fpm		Leveling Speed: fpm	
				Alternative Test QC: MCS:	
Checklist:				Is Test Satisfactory?	
				Date:	
1	8.6.5.16.1 Governors, Safeties and Oil Buffers Where Provided:				
*	8.6.4.20.1 Car & Counterweight Safeties: Car: <input type="checkbox"/> CW: <input type="checkbox"/> Both: <input type="checkbox"/> Type: A: <input type="checkbox"/> B: <input type="checkbox"/> (Flexible Guide: <input type="checkbox"/> Wedge: <input type="checkbox"/>) C: <input type="checkbox"/> or Other:			Yes: <input type="checkbox"/> No: <input type="checkbox"/> n/a: <input type="checkbox"/> [Alternative Test Method: <input type="checkbox"/>]	
	Manufacturer of Safety Device (Car):		Safety Device ID Number:		
	Stopping Distance: in. (Note: Use the average length of the continuous marks after deducting the length of the safety jaw or wedge.)				
	Did Car Set Out of Level: Yes: <input type="checkbox"/> No: <input type="checkbox"/>		If Yes, Measurement of Out of Level: in.		
	Condition of Guide Rails After Test: Good: <input type="checkbox"/> Poor: <input type="checkbox"/>		Wooden Guides Replaced: Yes: <input type="checkbox"/> No: <input type="checkbox"/>		
*	8.6.4.20.2 Governors:			Yes: <input type="checkbox"/> No: <input type="checkbox"/> n/a: <input type="checkbox"/>	
	Manufacturer of Speed Governor:		Speed Governor ID Number:		
	Jaws: Bronze: <input type="checkbox"/> Iron: <input type="checkbox"/>	Condition Before:		Condition After:	
	Rope: Iron: <input type="checkbox"/> Manila: <input type="checkbox"/> Steel: <input type="checkbox"/>	6 x 19: <input type="checkbox"/>	8 x 19: <input type="checkbox"/>	Size: in: <input type="checkbox"/> mm: <input type="checkbox"/> (dia.)	
	Rope Pull Through: lbs.		Rope Pull Out: lbs.		
	Tripping Speed: fpm		Overspeed Switch Tripping Speed: fpm		
	Governor Readjusted: Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Overspeed Switch Readjusted: Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Resealed: Yes: <input type="checkbox"/> No: <input type="checkbox"/>
*	8.6.4.20.3 Oil Buffers: Car: <input type="checkbox"/> CW: <input type="checkbox"/> Both: <input type="checkbox"/>			Yes: <input type="checkbox"/> No: <input type="checkbox"/> n/a: <input type="checkbox"/>	
2	8.6.5.16.2 Coated Ropes:			Yes: <input type="checkbox"/> No: <input type="checkbox"/> n/a: <input type="checkbox"/>	
3	8.6.5.16.3 Wire Rope Fastenings (Item 3.23 of A17.2):			Yes: <input type="checkbox"/> No: <input type="checkbox"/> n/a: <input type="checkbox"/>	
4	8.6.5.16.4 Plunger Gripper per 8.10.3.2.5(n):			Yes: <input type="checkbox"/> No: <input type="checkbox"/> n/a: <input type="checkbox"/>	
5	8.6.5.16.5 Overspeed Valves per 3.19.4.7.5(a): Tripping Speed:			fpm Yes: <input type="checkbox"/> No: <input type="checkbox"/> n/a: <input type="checkbox"/>	
6	8.6.5.16.6 Freight Elevator of Class C2 Loading Only:			Yes: <input type="checkbox"/> No: <input type="checkbox"/> n/a: <input type="checkbox"/>	
***	Test conforms to the Code in effect at time of original installation; and requirements at the time of any alteration; and ASME A17.3			Yes: <input type="checkbox"/> No: <input type="checkbox"/> (if no, explain)	

NOTES:

The Above Tests Were Performed In Compliance With ASME A17.1 and NAC 455C. 400-528 & Section 2 to 14	
Firm Performing Tests:	Date of Completion:
Print Name, License No. & Signature of Person Performing Test	Print Name, License No. & Signature of Person Witnessing Test

**Report shall be filed with the Mechanical Compliance Section within ten (10) days of Performing Test
One copy to be retained by Authorized Inspection Agency**