



| <b>ASME 18.1 Platform Lift and Stairway Chairlift Periodic Inspection &amp; Test</b>  |  |  |                           |
|---|--|--|---------------------------|
| <b>Location &amp; Contact Information</b>   |  |  |                           |
| Building Name:  |  | Contact Person:  |                           |
| Address:  |  | City:  | State:      Zip:          |
| Phone #:  |  | Email:   |                           |
| <b>Conveyance Information</b>   |  |  |                           |
| State Number: <b>NV</b>   | Serial #:  | Manufacturer:  | Number of Floors:         |
| Type of Drive:  | Platform Lift: <input type="checkbox"/> Stairway Chairlift: <input type="checkbox"/> Other: <input type="checkbox"/> |  |                           |
| <b>Inspection &amp; Test Information</b>  |  |  |                           |
| Inspection Date:  | Inspection Type:   | Inspection & Test: <input type="checkbox"/> Periodic: <input type="checkbox"/> Routine: <input type="checkbox"/> |                           |
| <b>10.2.2.1 Inside Platform Inspections ( <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> = Pass Fail n/a)</b>   |  |  |                           |
| a) Stop Switches: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> b) Operating Control Devices: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> c) Floor & Landing Sill: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> d) Lighting: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>   |  |  |                           |
| e) Emergency Signal: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> f) Door or Gate: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> g) Enclosure: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> h) Floor: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> i) Signs & Operating Device Symbols: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  |  |                           |
| j) Rated Load/Platform Floor Area/Data Plate: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> k) Ride: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  |  |  |                           |
| <b>10.2.2.2 Machine Inspections ( <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> = Pass Fail n/a)</b>   |  |  |                           |
| a) Enclosure of Machine Space: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> b) Guarding of Exposed Auxilliary Equipment: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> c) Overhead Beam & Fastenings: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>   |  |  |                           |
| d) Drive Machine Brake: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> e) Traction Drive Machines: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> f) Gears & Bearings: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> g) Winding Drum Machine: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>   |  |  |                           |
| h) Belt or Chain Drive Machine: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> i) Traction Sheaves: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> j) Secondary & Deflector Sheaves: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> k) Rope Fastenings: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  |  |  |                           |
| l) Slack Rope Devices: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> m) Governor, Overspeed Switch & Seal: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> n) Platform Safeties: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> o) Hydraulic Power Unit: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>   |  |  |                           |
| p) Control Valves: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> q) Hydraulic Cylinders: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  |  |  |                           |
| <b>10.2.2.3 Inside Runway Inspections ( <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> = Pass Fail n/a)</b>   |  |  |                           |
| a) Platform/Overhead/Deflector Sheaves: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> b) Normal Terminal Stopping Devices: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> c) Final Terminal Stopping Devices: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>   |  |  |                           |
| d) Broken Rope, Chain, or Tape Switch: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> e) Counterweight: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> f) Head Room: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> g) Slack Rope Devices: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>   |  |  |                           |
| h) Traveling Sheave: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> i) Platform Safeties & Guiding Members: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> j) Runway Construction: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>   |  |  |                           |
| k) Pipes, Wiring & Ducts: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> l) Runway Clearances: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> m) Traveling Cables & Junction Boxes: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  |  |  |                           |
| n) Door & Gate Equipment: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> o) Platform Frame: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> p) Guide Rails Fastening & Equipment: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> q) Governor Rope: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  |  |  |                           |
| r) Governor Releasing Carrier: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> s) Wire Rope Fastening & Hitch Plate: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> t) Suspension Rope: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>   |  |  |                           |
| u) Compensation Ropes & Chains: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  |  |  |                           |
| <b>10.2.2.4 Outside Runway Inspections ( <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> = Pass Fail n/a)</b>  |  |  |                           |
| a) Runway Doors: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> b) Runway Door Locking Devices: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> c) Runway Enclosure: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  |  |  |                           |
| <b>10.3.1 One (1) Year Inspection and Test Requirement ( <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> = Pass Fail n/a)</b>  |  |  |                           |
| 1) Cylinders: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2) Safeties (No Load): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3) Governors: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 4) Slack Rope Devices on Winding Drum Machines: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  |  |  |                           |
| 5) Normal & Final Terminal Stopping Devices: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 6) Broken Rope, Tape or Chain Switch: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  |  |  |                           |
| 7) Slack Rope Device on Roped Hydraulic: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Working Pressure: _____ psi Relief Pressure: _____ psi  |  |  |                           |
| <b>10.3.3 Five (5) Year Inspection and Test Requirement ( <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> = Pass Fail n/a)</b>   |  |  |                           |
| 1) Platform Safeties: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2) Governor: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3) Brake: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 4) Ropes: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5) Fastenings: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                              |  |  |                           |
| <b>Firm Performing Test:</b>  | <b>Digital Signature:</b>  | <b>Firm Witnessing Test:</b>   | <b>Digital Signature:</b> |
|   |  |  |                           |
| <b>Mechanic (Print/License#/Sign or E-Sign):</b>  |  | <b>Inspector (Print/QEI#/Sign or E-Sign):</b>  |                           |
|   |  |  |                           |

Report shall be filed with the Mechanical Compliance Section within ten (10) days of performing Inspection/Test  
 One (1) copy to be retained by owner or tenant