## **NEVADA DEPARTMENT OF BUSINESS & INDUSTRY** Division of Industrial Relations MECHANICAL COMPLIANCE **SECTION**

4600 Kietzke Lane, Suite F-151 Reno, Nevada 89502 Telephone: (775) 688-3750 Insured: (775) 688-3752 Fax: (775) 688-1664

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## **INSPECTION FORM**

OBJECT Description *:		Use *:	Use *:	
State Number *:		Drive *:		
Serial Number *:		 Cat 1:		
User Number:		 Cat 3:		
Capacity *:		 Cat 5:		
Manufacturer *:		Landings *:		
Year Built *:		Speed *:		
Exemption:	Y	Location of Object *:		
Type of Inspection *:		Working Pressure:		
First Cert Inspection	*:YN	Relief Setting:		
<u>USER</u>		<u>OWNER</u>		
Name *:		Name *:	Name *:	
Address *:		Address *:		
City *:		City *:		
State *:	Zip *:	State *:	Zip *:	
REQUIREMENTS:				
Name and Title of P	erson to Whom Requirements We	re Explained *:		
			Next Insp:	
Issue Permit:	FIELD INSPECTOR:		QEI:	
LAST INSPECT	ON:	NEVADA DIR	- MECHANICAL COMPLIANCE SECTION	
Elevators / Rel Equip Op Permit (months)			Status:	