

# ANNUAL HYDRAULIC ELEVATOR TEST FORM

## STATE OF MONTANA DEPARTMENT OF LABOR AND INDUSTRY BUILDING CODES & COMMERCIAL MEASUREMENTS ELEVATOR SAFETY SECTION

Per ARM 24.301.602 (1) (d) ASME A17.1 2004 8.11.3.2

All testing shall be performed by a licensed elevator personnel

State Elevator No. \_\_\_\_\_

Building Name \_\_\_\_\_ County: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Type of elevator: Passenger ( ) Freight ( ) LULA ( ) Dumbwaiter ( ) Other: \_\_\_\_\_

Machine type: Hydraulic ( ) Roped Hydraulic ( ) Other: \_\_\_\_\_

Type of Safety: Broken rope ( ) A: Instantaneous ( ) B: Gradual ( ) C: Type A with oil buffers ( ) Relief valve ( )

Location of safety devices: Safety Plank ( ) Crosshead ( ) Counterweight ( ) NA ( )

Did all Door locks, Car gates, Stop, Broken-Rope, Selector tape, or Safety operated switches disable elevator as required?

Yes ( ) No ( )

Material of guide rails: Car: Steel ( ) Wood ( ) Counterweight: Steel ( ) Wood ( ) NA ( )

Type of governor: Flyball ( ) Centrifugal ( ) NA ( ) Sealed before test: Yes ( ) No ( )

Type and number of buffers: Car: Spring ( ) Oil ( ) NA ( ) Other \_\_\_\_\_ Number: \_\_\_\_\_

Counterweight buffers: Spring ( ) Oil ( ) NA ( ) Other \_\_\_\_\_ Number: \_\_\_\_\_

Was governor tripping speed tested? Yes ( ) No ( ) NA ( ) Was the governor sealed before testing Yes ( ) No ( ) NA ( )

Did Final Limits operate in both directions? Yes ( ) No ( ) NA ( ) Did Normal Limits operate as required? Yes ( ) No ( )

Did Fire Operation Phase 1 & 2 function as required? Yes ( ) No ( ) NA ( )

Was the door closing force less than 30 lbs. When tested between 1/3 and 2/3 of opening after stalling door: Yes ( ) No ( )

Did Low oil protection operate as required? Yes ( ) No ( )

If a flexible hose and fittings assembly is on this elevator it shall be tested at relief pressure for 30 sec. and a metal test

tag shall be attached showing date and name of Company or Person doing test? Yes ( ) No ( ) NA ( )

Are the required governor, buffer, over-speed valve, carrier and relief valve seals and tags affixed in accordance with the

Code? Yes ( ) No ( )

Has this test been logged in the elevator maintenance log and is the maintenance log up to date? Yes ( ) No ( ) NA ( )

### PERIODIC TEST FOR GOVERNORS, SAFETIES AND OIL BUFFERS

Did governor jaws drop of its own weight when latch was released? Yes ( ) No ( ) NA ( )

Did all parts of governor and safety perform the functions for which intended? Yes ( ) No ( ) NA ( )

Did oil buffers return within 90 sec. and was oil level checked? Yes ( ) No ( ) NA ( )

**\*Was a Metal tag placed on safety; releasing carrier and buffers in a permanent manner? Yes ( ) No ( ) \***

**\*\*Marking Pens do not qualify as a permanent manner. \*\***

Relief valve by-passed pressure at: \_\_\_\_\_ psi. Rated load working pressure: \_\_\_\_\_ psi.

Car speeds: Rated load up: \_\_\_\_\_ fpm. Rated Load down \_\_\_\_\_ fpm.

Was there any change in the car position which cannot be accounted for by visible oil leakage or temperature change during the standard test: Yes ( ) No ( ) 15 minutes test required per Rule 1005.2a Yes ( ) No ( )

Was test performed against stop ring? Yes ( ) No ( )

**\* Was metal tag with seal, as required, placed on relief valve in a permanent manner: Yes ( ) No ( ) \***

**\*\*Marking Pens do not qualify as a permanent manner. \*\***

**\*\*Tags can only be used for a one year period\*\***

Have any changes been made since last year? Yes ( ) No ( ) Are any changes needed? Yes ( ) No ( )

Company Name \_\_\_\_\_ Sign Name \_\_\_\_\_

Print Name \_\_\_\_\_ State License No. \_\_\_\_\_ Date \_\_\_\_\_

All lines must be filled out with each test. Send results within 10 days to:

Building Codes Program Box 200517 Helena, MT 59620-0517 Fax 406-841-2050 or email: buildingcodes@mt.gov