



State of Idaho
Division of Occupational and Professional Licenses
Elevator Safety Program
Alteration Plan Review Worksheet

Date:		Current Elevator State ID #	
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Address:	
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The purpose of this worksheet is to aid in helping the Division of Occupational and Professional Licenses with the plan review process for modifications being completed on conveyances:

- ♦ **No** alterations or installation shall begin until plans are approved and a permit has been issued.
- ♦ Submit a separate worksheet for each conveyance.
- ♦ Submit the complete outlined package to prevent delays.

Please type or print clearly

Supporting Alteration Plan Review documentation to submit :

- Architectural drawings or layout of the machine room/space
- Scope of Work
- Work to be performed by others
- Photos

EXISTING INFORMATION

General				
Installation year: _____	Alteration year(s): _____	# Landings: _____	Front Openings: _____	Rear Openings: _____
Rated load: _____ lbs	Rated speed: _____ fpm	MRL: <input type="checkbox"/> YES <input type="checkbox"/> NO		
Type of Equipment:				
<input type="checkbox"/> Passenger	<input type="checkbox"/> Dumbwaiter	<input type="checkbox"/> Vertical Platform		
<input type="checkbox"/> Freight A	<input type="checkbox"/> Material Lift	<input type="checkbox"/> Inclined Platform		
<input type="checkbox"/> Freight B	<input type="checkbox"/> Limited Use (LULA)	<input type="checkbox"/> Stairway Chair		
<input type="checkbox"/> Freight C1	<input type="checkbox"/> Sidewalk	<input type="checkbox"/> Special Purpose		
<input type="checkbox"/> Freight C2	<input type="checkbox"/> Escalator			
<input type="checkbox"/> Freight C3				
Type of Drive Unit:				
<input type="checkbox"/> Cable ball and socket	<input type="checkbox"/> Chain (Electric)	<input type="checkbox"/> Chained Hydraulic	<input type="checkbox"/> Rack and pinion	
<input type="checkbox"/> Roped Hydro	<input type="checkbox"/> Direct Hydro	<input type="checkbox"/> Screw	<input type="checkbox"/> Traction	<input type="checkbox"/> Winding drum

Hoistway, Machine Room and Pit

Type of hoistway doors:	Type of car doors:	Number of ropes:	Size of ropes:
Type of operation: <input type="checkbox"/> Automatic <input type="checkbox"/> Manual <input type="checkbox"/> Continuous pressure		Type of emergency communication in car: <input type="checkbox"/> Phone <input type="checkbox"/> Intercom	
* Is elevator part of an accessible route? <input type="checkbox"/> Yes <input type="checkbox"/> No	** Fire rating of building: <input type="checkbox"/> None <input type="checkbox"/> 1hr <input type="checkbox"/> 2hr	Machine room vent: <input type="checkbox"/> Yes <input type="checkbox"/> No	Hoistway vent: <input type="checkbox"/> Yes <input type="checkbox"/> No
Type of hoistway construction: <input type="checkbox"/> Concrete <input type="checkbox"/> Sheetrock <input type="checkbox"/> Glass <input type="checkbox"/> Other:		Type of machine room construction: <input type="checkbox"/> Concrete <input type="checkbox"/> Sheetrock <input type="checkbox"/> Other:	
Sump pump: <input type="checkbox"/> Yes <input type="checkbox"/> No	Oil/water separator: <input type="checkbox"/> Yes <input type="checkbox"/> No	Buffer type: <input type="checkbox"/> Spring <input type="checkbox"/> Oil <input type="checkbox"/> Elastomeric <input type="checkbox"/> Bumper	Pit ladder: <input type="checkbox"/> Yes <input type="checkbox"/> No
Guide rail type: <input type="checkbox"/> Tee <input type="checkbox"/> Formed <input type="checkbox"/> Angle <input type="checkbox"/> Omega <input type="checkbox"/> U-channel <input type="checkbox"/> Pipe <input type="checkbox"/> Other:	Guard rail sizes: Car: _____ Counterweight: _____		

EXISTING INFORMATION *continued*

Safety Device

Safety device type: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> Other:		Speed governor type: <input type="checkbox"/> Centrigual <input type="checkbox"/> Fly-ball <input type="checkbox"/> Friction <input type="checkbox"/> Other:		
Car safety switch: <input type="checkbox"/> Yes <input type="checkbox"/> No	Slack rope switch: <input type="checkbox"/> Yes <input type="checkbox"/> No	Counterweight safeties: <input type="checkbox"/> Yes <input type="checkbox"/> No	Compensating ropes: <input type="checkbox"/> Yes <input type="checkbox"/> No	Ascending car overspeed and unintended car movement protection: <input type="checkbox"/> Yes <input type="checkbox"/> No
Size of governor rope:		Type of governor rope:		

Machine

Machine type: <input type="checkbox"/> Hydraulic <input type="checkbox"/> Winding drum <input type="checkbox"/> Single wrap <input type="checkbox"/> Double wrap <input type="checkbox"/> Geared Traction <input type="checkbox"/> Gearless Traction		Machine location: <input type="checkbox"/> MRL <input type="checkbox"/> Pit <input type="checkbox"/> Top of hoistway <input type="checkbox"/> Basement <input type="checkbox"/> Side <input type="checkbox"/> Remote <input type="checkbox"/> Overhead		
Brake type: <input type="checkbox"/> Disc <input type="checkbox"/> Drum	Car weight: lbs _____	Counter weight: lbs _____	Rope Construction: _____ X _____	
Rope material: <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____		Type of rope fastenings: <input type="checkbox"/> Babbit <input type="checkbox"/> Wedge clamp		

Fire Fighter's Service and Fire Safety

Fire Fighter's Service: <input type="checkbox"/> None <input type="checkbox"/> Phase I <input type="checkbox"/> Phase I & II	Sprinklers located in: <input type="checkbox"/> Machine room <input type="checkbox"/> Top of Hoistway/Runway <input type="checkbox"/> Pit	Smoke/Heat Detectors: <input type="checkbox"/> Machine room <input type="checkbox"/> Hoistway/Runway <input type="checkbox"/> Elev lobbies
Location of remote fire recall switches:	Main evacuation level:	Alternate evacuation level:

Electrical

Horsepower:	Power from more than 1 source: <input type="checkbox"/> Yes <input type="checkbox"/> No	Volts (main):	Phase:
GFCI outlets? <input type="checkbox"/> None <input type="checkbox"/> Machine room <input type="checkbox"/> Pit <input type="checkbox"/> Hoistway	Emergency lowering only: <input type="checkbox"/> Yes <input type="checkbox"/> No	Emergency Stand-by Power: <input type="checkbox"/> Yes <input type="checkbox"/> No	Volts (battery if applicable): _____

Photos Provided

<input type="checkbox"/> Machine Space	<input type="checkbox"/> Overhead	<input type="checkbox"/> Pit	<input type="checkbox"/> Hoistway
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*** Is elevator part of the accessible route?**

For this information you will need to contact the building owner or local building jurisdiction to determine if the elevator is used to exit ADA during an emergency.

**** Fire rating of building:**

Fire rating is determined by the building code. Normally, 1 story is none, 2-4 stories is 1 hour and above 4 stories is 2 hour. Check with the building owner or originally building plans.

ALTERATION INFORMATION - Check all items that apply

Electric (8.7.2) and Hydraulic (8.7.3) Elevators			Hydraulic (8.7.3) Elevators		
1.	8.7.2.1/8.7.3.1	Hoistway enclosures	1.	8.7.3.17	Change in type of service
2.	8.7.2.2/8.7.3.2	Pits	2.	8.7.3.18	Change in class loading
3.	8.7.2.3/8.7.3.3	Location and guarding of cwt	3.	8.7.3.19	Carrying pass, on freight elevators
4.	8.7.2.4/8.7.3.4	Vertical clearances	4.	8.7.3.20	Increase in rated load
5.	8.7.2.5/8.7.3.5	Horizontal clearances	5.	8.7.3.21	Increase in dead weight of car
6.	8.7.2.6/8.7.3.6	Protection of spaces below	6.	8.7.3.23.1	Hydraulic jack
7.	8.7.2.7/8.7.3.7	Machine rooms and spaces	7.	8.7.3.23.2	Plungers
8.	8.7.2.8/8.7.3.8	Electrical equipment and wiring	8.	8.7.3.23.3	Cylinders
9.	8.7.2.9/8.7.3.9	Machinery, beams, and supports	9.	8.7.3.23.4	Increase in working pressure
10.	8.7.2.10/8.7.3.10	Entrances and H/W doors	10.	8.7.3.23.5	Relocation of hydraulic jack
11.	8.7.2.11/8.7.3.11	Hoistway door locks and access	11.	8.7.3.23.6	Relocation of hydraulic machine
12.	8.7.2.12/8.7.3.12	Power operation of H/W doors	12.	8.7.3.23.7	Plunger gripper
13.	8.7.2.13	Door reopening device	13.	8.7.3.24	Valves, piping, and fittings
14.	8.7.2.14/8.7.3.13	Car enclosures/door and gates	14.	8.7.3.27	Car buffers and bumpers
15.	8.7.2.15/8.7.3.14	Cars, frames, and platforms	15.	8.7.3.29	Tanks
16.	8.7.2.16	Capacity, loading classification	16.	8.7.3.30	Terminal stopping devices
17.	8.7.2.17.1/8.7.3.22.1	Change in travel	17.	8.7.3.31.3	Anti-creep leveling device
18.	8.7.2.17.2/8.7.3.22.2	Increase in rated speed	18.	8.7.3.31.9	Auxiliary power lowering devices
19.	8.7.2.18/8.7.3.15	Car and counterweight safeties			
20.	8.7.2.19/8.7.3.16	Governors and governor rope			
21.	8.7.2.20	Ascending car overspeed	Material lifts and dumbwaiters		
22.	8.7.2.20	Unintended car movement	1.	8.7.7.3.1	General
23.	8.7.2.21/8.7.3.25	Suspension ropes, connections	2.	8.7.7.3.2	Removal of auto-transfer device
24.	8.7.2.22/8.7.3.26	Counterweights	3.	8.7.7.3.3	Converting to elevator classification
25.	8.7.2.23	Cars and counterweight buffers	4.	8.7.7.3.4	Converting to dmbwtr classification
26.	8.7.2.24/8.7.3.28	Guide rails and their supports			
27.	8.7.2.25	Driving machines and sheaves			
28.	8.7.2.26	Terminal stopping devices			
29.	8.7.2.27.1/8.7.3.31.1	Top-of-car operating devices			
30.	8.7.2.27.2/8.7.3.31.2	Car leveling-truck zone devices			
31.	8.7.2.27.3/8.7.3.31.4	Change in power supply			
32.	8.7.2.27.4/8.7.3.31.5	Controllers			
33.	8.7.2.27.5/8.7.3.31.6	Change in motion control			
34.	8.7.2.27.6/8.7.3.31.7	Change in operation control			
35.	8.7.2.28/8.7.3.31.8	Emergency operation, signaling			