



**STATE OF IDAHO**  
**DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES**  
**CONTRACTOR PRE ELEVATOR INSPECTION CHECK SHEET**

State ID#:		Date:	
Building Name:			
Location:			
Construction Company:			
Record Prints on Site:	Yes	No	Date Approved:
Construction Company Representative's Signature:			

**This document is to be filled out, signed and delivered to the Elevator Safety Program prior to scheduling an inspection.**

<b>MACHINE ROOM</b>	<b>Completed Date</b>
Enclosure of Machine Space	
Access Door Self Locking & Self Closing	
Temperature Control of Machine and Control Space	
Lighting of Machine Space	
Electric Receptacle Provided	
Fused Main Electrical Disconnect Switch	
Elevator Car Electrical Disconnect Switch with Lock Out Provision	
Automatic Disconnect Means Provided	
Heat Detector and/or Smoke Detector Installed	
Only Elevator Utilities, Piping, and Ducting	
Drains in Machine Room Running to Safe Location	
5 ABC Fire Extinguisher Provided	
Battery Lowering Auxiliary Contact Provided	

<b>INSIDE CAR</b>	<b>Completed Date</b>
Means of Two-way Communication Provided	
Fire Recall Phase I & Firefighters Service Phase II Tested and Functioning	
Fire Signal Function	

<b>OUTSIDE HOISTWAY</b>	<b>Completed Date</b>
Landing Sill	
Smoke Detector Installed	

<b>PIT</b>	<b>Completed Date</b>
Pit Light Switch Location	
Pit Light Provides 10 Foot-candles	
Electric Receptacles	
Pit Access Door	
Pit Access Ladder	
Pit Sump and Drain	
Automatic Disconnecting Means	
Heat Detector Installed	
Pit Construction	

<b>TOP OF CAR</b>	<b>Completed Date</b>
Hoistway Vented	
Only Elevator Utilities	
Hoistway Side of the Door Frames	
Hoistway Clearances	
Approved Floor Over Hoistway	
Projections, Recesses, and Setbacks	
Construction of the Hoistway Enclosure	
Automatic Disconnecting Means	
Heat Detector Installed	
Smoke Detector Installed	
Refuge Space	

Elevator Company:		Date:	
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By signing below you are stating that the above listed elevator installation is complete and ready for inspection.

Signature:		Print Name Here:	
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