



**Scott Walker, Governor
 Dave Ross, Secretary**

Elevator, Dumbwaiter & Material Lift Test Report (except Safety Device & Governor) – Acceptance and Category 5

Please type or print clearly. Illegible and incomplete forms will not be accepted.
 Personal information you provide may be used for secondary purposes [Privacy Law s. 15.04(1)(m), stats.]

Building Information					Owner Information (complete if changed)						
Name					Name						
Address					Address						
City		State	WI	ZIP	City		State	ZIP			
Conveyance Information			Regulated Object ID or Tag No.			Manufacturer					
Type	Passenger <input type="checkbox"/>	Freight <input type="checkbox"/>	Comm. Inclined <input type="checkbox"/>	Ltd. Use/ Ltd. Appl. (LULA) <input type="checkbox"/>	Part V or Residential <input type="checkbox"/>	Special Purp. (SPPE) <input type="checkbox"/>	Sidewalk <input type="checkbox"/>	Stage/Orch. <input type="checkbox"/>	Dumbwaiter <input type="checkbox"/>	Type B Mat'l Lft <input type="checkbox"/>	
Drive Type	Electric Traction				Hydraulic				Rack & Pinion <input type="checkbox"/>	Screw <input type="checkbox"/>	Hand <input type="checkbox"/>
	Overhead <input type="checkbox"/>	Machine room-less <input type="checkbox"/>	Basement <input type="checkbox"/>	Winding drum <input type="checkbox"/>	Direct In Ground <input type="checkbox"/>	Direct Hole-less <input type="checkbox"/>	Roped <input type="checkbox"/>	Chained <input type="checkbox"/>			
Rated load (lbs):		Rated speed (up, fpm):		Operating speed (down, fpm):			Leveling speed (fpm):				

The following tests are to be performed for **Elevators** according to **ASME A17.1, 8.6.4.20 [Electric], 8.6.5.16 [Hydraulic], 8.6.6.1.1 [Rack & Pinion], 8.6.6.2.1 [Screw], 8.6.6.3.1 [Hand], 8.6.7 [Special Application] or 8.6.10.1.1 [Dumbwaiters and Material Lifts]**.

Also refer to the code in effect when the conveyance or applicable components were installed, unique manufacturer's procedures as addressed in ASME A17.1, 8.6.1.2.1(f) and 8.6.1.2.2(b), and ASME A17.2.

Component, device or system	Pass	Fail	n/a	Date	Component, device or system	Pass	Fail	n/a	Date
Safety device, Car See form SBD-2E-E					Inner landing zone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety device, Cwt See form SBD-2E-E					Braking syst., traction and traction limits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Governor, switch, seal See form SBD-2E-E					Emergency brake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Oil buffers Car <input type="checkbox"/> Cwt <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Coated ropes for roped hydraulic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Driving machine brakes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Wire rope fastenings for roped hydraulic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Em. term. stopping and speed limiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Plunger gripper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Power opening of doors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Overspeed valves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Leveling zone and leveling speed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Hyd. freight sustain, level w/max load	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Testing Information				
Contractor Name (or Owner if performed by a licensed employee)			Individual Name	
Address			License Number	
City	State	ZIP	Signature	

If tests were not witnessed by an inspector or person authorized by the department, send this completed form to the inspector according to the map on the Elevator program web page: [Elevator Inspector Map](#)

For an elevator, dumbwaiter or material lift, place a copy of the completed form in the maintenance record. See ASME A17.1, 8.6.1.4.1, 8.6.1.7.2 and SPS 318.1708(2)(e) for additional information regarding on-site records and test tags.

Witnessing of Tests: SPS 318.1708(2)(d). Periodic tests may be witnessed by an inspector of the department, agent municipality or by a person authorized by the department or agent municipality.