

#### **Division of Hotels and Restaurants**

# STEP BY STEP INSTRUCTIONS FOR COMPLETING THE ELEVATOR INSPECTION REPORT

These instructions provide user information by category for completing the written and bubbled portions of DBPR Form HR 5023-003, Elevator Inspection Report. Begin in the upper left corner of the inspection report.

#### **GENERAL INSTRUCTIONS**

- Each circle with a number or letter represents a "bubble".
- All columns under boxes must be bubbled in completely using black pen. Failure to mark all boxes will result in the forms being returned.
- All data fields must be completely legible. We will return illegible forms.
- Avoid stray marks in the bubble areas, especially in the violation section. These marks will be scanned as violations.
- Do not fold the form.
- Mail in an 8 X 10 or larger envelope.
- Do not staple the forms.
- Avoid using liquid White Out as it does not cover the marks sufficiently and tends to glue pages together. White Out tapes works best.
- Avoid spills and liquids, or handling the forms with greasy hands that leave marks and may cause the scanner to create incorrect entries.

### Step 1

#### **INSPECTION DATE**

Please complete one bubble for each vertical column.

**Month** – Fill in the two-digit month number in the spaces provided. Complete the first bubble "0" for months 1-9 or "1" for months 10-12. Complete the second bubble as appropriate. Example: For July, please fill in "07" in the 2 bubbles under Month.

**Day** – Fill in the two-digit day number in the spaces provided. In the first bubble, complete the "0" for days 1-9, "1" for days 10-19, "2" for days 20-29 or "3" for days 30-31. Complete the second bubble as appropriate.

Year - Fill in the current two-digit year number in the spaces provided.

#### 

## Step 2 CERTIFIED ELEVATOR

### INSPECTOR NUMBER

Please complete one bubble for each vertical column.

Fill in the four-digit CEI number in the spaces provided. Current CEI numbers consist of three digits with a leading zero. Complete the bubble "0" for the lead digit. Then, complete bubbles "0-9" for the first, second and third digits. For example, enter CEI # 1 as "0001", CEI # 10 as "0100", CEI # 100 as "0100", etc.

CERTIFIED ELEVATOR INSPECTOR (CEI) #							
0709456789	0109456789	0100456789	0(1(3)(4)(5)(6)(7)(8)(9)				

### Step 3

#### TYPE OF INSPECTION

Please mark only one bubble.

**Routine** – Complete this bubble only if you perform a full annual inspection. You must leave a copy of the inspection report and metal tags for all tests in machine room. You may also leave elevator inspection tags as a courtesy.

**Alteration Acceptance** – Complete this bubble only if the alteration is complete and the device passes all required tests. Violations are NOT allowed for this type of inspection. If you find violations, the inspection must be marked as Construction. You should never submit a callback inspection on an Alteration Acceptance inspection.

**Callback** – Complete this bubble only when you perform an inspection to clear violations cited on a Routine inspection. You may not use this type as a follow-up on initial acceptance or alteration acceptance inspections. Provide in writing the specific violation(s) corrected in the comments section.

**Construction** – Complete this bubble only when you perform an alteration acceptance or initial acceptance inspection and find violations. The Bureau of Elevator Safety uses completion of the inspection report to record the visit, but will not clear or pass the permit with this type of inspection.

T	PE OF INSPECTION					
	Routine					
	Alteration Acceptance					
	Callback					
١Ō٩	Construction					
١۞١	nitial Acceptance					
	Temporary Operating nspection					
	DBPR USE ONLY					
	Accident					
LŎ	Complaint					
ΙŌ	Compliance Monitoring					
	ndustry Oversight/Audit					

Initial Acceptance – Complete this bubble only for NEW elevators with a Temporary Operating Certificate. Violations are NOT allowed for this type of inspection. If you find violations, the inspection must be marked as Construction. You should never submit a callback inspection on an Initial Acceptance inspection. The superintendent of construction must sign this type of inspection (see step 7) or it will be returned as incomplete. Installation must be complete with all tests completed successfully, metal tags affixed, all alarms connected and functioning, and no further work needed.

**Temporary Operating Inspection** – Complete this bubble only for new installations or alterations that are not ready for final inspection. This type allows the device to be used by construction personnel only, provided all requirements in Section 399.03(10)(a), Florida Statutes, are met. Temporary operating inspections (TOIs) are only valid for 30 days. You must perform and witness all required tests BEFORE issuing a temporary permit and recheck all items on every subsequent TOI. You must post a current inspection in the car at all times. Failure to post the form inside the car will result in immediate sealing of the unit and possible administrative action against the installing company.

### Step 4

#### TIME IN / TIME OUT

For TIME IN, enter the time you start the inspection in 24-hour (military) time (after 1:00PM

+12 = 13:00). For TIME OUT, enter the time you complete the inspection in 24-hour time increments.

# TIME IN

### Step 5

### INSPECTION COMPANY INFORMATION AND BUILDING ADDRESS

TIME OUT	Inspection Company Name	REC#
Building Name		
Building Address		
City		Zip Code

Write in the name of the inspection company and registered elevator company license number. If the inspector is not affiliated with a company, enter the inspector name as listed on the certified elevator inspector license.

Complete the actual location address. Write the building name in the space provided. Complete the building address and include the:

- Street address, not an intersection or generic location,
- Building number and/or letter (Condo D, etc),
- Street name, no abbreviations
- Street suffix (Ave, St., Rd, etc.), and,
- Street direction indicator (N, W, E, S, NW, etc.)
- City, State, Zip Code

If the name or address on the certificate of operation differs from the current name or address, have the owner contact the Bureau of Elevator Safety in writing. The bureau does not update addresses solely from the inspection reports.

# Step 6 SERIAL NUMBER

Please complete one bubble for each vertical column.

The serial number is the same as the license number on the certificate of operation. Serial numbers currently require a six digit entry and older units require a leading zero. For example, serial # 123 should be entered as "000123".

	SERIAL NUMBER						
0103456789	01000456789	01000456789	0100456789	0123456789	(D)(D)(D)(D)(D)(D)(D)(D)(D)(D)(D)(D)(D)(		

### Step 7

#### SUPERVISOR OF CONSTRUCTION

SUPERVISOR OF CONSTR	UCTION	a a a a
I certify that as the elevator company supervisor, I dire		or installation of this elevator.
	ator installation affidavit.	057#
Signature	CEI#	CET#
Print Name	Phone	Number

Attestation that the installation was supervised must be completed for initial acceptance inspections (see step 3). The superintendent of construction must sign this type of inspection or it will be returned as incomplete. Installation must be complete with all tests completed successfully, metal tags affixed, all alarms connected and functioning, and no further work needed.

### Step 8

### VIOLATION 1 through VIOLATION 9

Write the violation code in the space provided. This is an alphanumeric entry provided in the codes available from the Bureau of Elevator Safety. Complete the bubble E-O for the first character. Complete the bubbles 0-9 for the second, third and fourth digits.

VIOLATION 1				
$\mathbb{L}(\mathbb{L})$	0123456789	0123456789	0123456789	

### Step 9

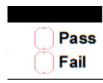
### COMMENTS

Write a brief description in the comment section and cite a specific code reference related to the inspection, violations, tests, pressure, etc., as needed.

### Step 10

#### PASS/FAIL

If there are any violations cited, check the "fail" box to indicate to the owner that this inspection failed and the violations must be corrected. If there are no violations, mark the "pass" box.



### Step 11

#### PERSON RECEIVING THIS REPORT

Obtain a signature, title, print name, and telephone number from a building representative. Leave a copy of the completed inspection report with the owner or owner's agent. Section 399.049(1)(c), Florida Statutes –

Failure by a certified elevator inspector to provide the department and the certificate of operation holder with a copy of the inspection report within 5 days after the date of any inspection performed after the initial certificate of operation is issued.

### Step 12

#### CERTIFIED ELEVATOR INSPECTOR

I certify that I have per Routine inspection	sonally perform	ned or witne	essed:
Periodic tests as prescribed by ASME A17.1  Acceptance inspection of new or altered installation as recommended by the ASME A17.2 Inspectors Manual		This device  Complies With  Does Not Comply With	
Violations cited on the previous inspection report have been corrected.  Installation meets or exceeds minimum standards of Chapter 399, Florida Statutes, and Chapter 30 of the Florida Building Code adopted by Rule 9B-3.047, Florida Administrative Code.			Is Exempt From Section 399.15, Florida Statutes: Regional emergency elevator access/fire key requirements.
Signature	CEI#	REC#	
Print Name	Phone N	umber	

Complete the appropriate bubbles to attest that the CEI has personally performed or witnessed one or more of the actions described. The CEI must sign the form and print the name, CEI # and/or registered elevator company (REC) number and telephone number.

Complete one bubble for Emergency Fire Key that states that the device complies, does not comply, or is exempt from this requirement.

### **Reverse Side of the Form**



State of Florida
Department of Business and
Professional Regulation
Division of Hotels and Restaurants
Bureau of Elevator Safety
www.MyFloridaLicense.com/dbpr/hr/

#### NOTICE

#### TEMPORARY OPERATING PERMIT

(Inspector must check	k box and sign)	
Construction p	personnel, tools and materials only	
EXPIRES:	(not to exceed 30 days from inspection date)	

I attest that on this date, all tests required by Section 399.03(10)(a), Florida Statutes, were completed and witnessed by me and that all safety devices, doorlocks, door circuit and safety circuits are installed and properly functioning. In addition, all requirements of Section 5.10, A.S.M.E. A17.1 have been met.

Certified Elevator Inspector	CEI Number
Certified Elevator Inspector Phone #	CEI Expiration Date

This temporary operating permit is valid for 30 days from the date above. Operating this conveyance after 30 days without a new inspection is a violation of Chapter 399, Florida Statutes, punishable by a fine of up to \$1,000 per violation.

NOTE TO INSPECTOR: All tests, door locks, door circuit and safety circuits must be checked and safety device checks must be repeated for each temporary operation permit issued.

DBPR Form HR 5023-005 Rule 6

#### TEMPORARY OPERATING PERMIT (TOP)

- Use the left side of the form for Temporary Operation Permit ONLY.
- Check if the device will be used for construction use only. The device must meet all requirements of Section 5.10, ASME A17.1, including completed and witnessed tests required by Section 399.03(10)(a), F.S. In addition, attest that all safety devices, door locks, door circuit and safety circuits are installed and properly functioning.
- Fill in the expiration date, which will be 30 days from the date of inspection.
  - Complete the signature and inspector information section.
- Ensure all required tests have been performed, witnessed, metal tags affixed, and all required operating and safety systems are functioning before issuing a Temporary Operating Permit.

#### **TEMPORARY CERTIFICATE OF OPERATION (TCO)**

- Use the right side for NEW installations ONLY!
- The form is for Temporary Use ONLY until the owner receives the Certificate of Operation. This is not an annual certificate of operation and it does not change the renewal date.
- Make sure the Bureau of Elevator Safety has the correct mailing address to ensure delivery of the certificate.
- Complete the location information box as noted. If the address noted on the permit is no longer correct, please correct and inform the Bureau when submitting the inspection report.
- Fill in the inspection date in the center area as marked.
- Complete the type of conveyance in the area provided.
- Complete the elevator and inspector information section completely.
- Post in the car in the certificate frame and instruct the building owner/manager to replace it with the certificate once it is received.
- DO NOT USE this form for elevators that are already turned over and may be delinquent. The Bureau of Elevator Safety considers such use as falsification of records. Using the form in this way will subject you to administrative action up to and including revocation of your Certified Elevator Inspector certification.



State of Florida
Department of Business and
Professional Regulation
Division of Hotels and Restaurants
Bureau of Elevator Safety
www.MyFloridaLicense.com/dbpr/hr/

### FLORIDA TEMPORARY CERTIFICATE OF OPERATION

THIS IS PUBLIC NOTIFICATION THAT THE CONVEYANCE LOCATED AT:

e &	Building Name/Elevator Location
ocation	Building Address
P P	Crty/State/Zip Code

WAS INSPECTED BY A FLORIDA STATE CERTIFIED ELEVATOR INSPECTOR ON

	Inspection Date					
NOTICE TO ELEVATOR OWN						NE
Successfully passing an	initial	accept	ance insp	pection	autho	rizes

Successfully passing an initial acceptance inspection authorizes use of a copy of this form as a temporary certificate of operation until receipt of the original certificate of operation issued by the Department of Business and Professional Regulation or for a maximum of sixty (60) days, whichever occurs first. You must apply for a certificate of operation within 30 days of taking possession of the building.

The elevator owner is responsible for the safe operation of this

conveyance and continued compliance with all Florida laws governing the elevator bearing the below license number as a(n):

TYPE OF CONVEYENCE:

License Number

Landings

Certified Elevator Inspector and CEI #

Capacity (Lbs.)

Expiration Date

Certified Elevator Inspector Phone #



NO SMOKING NO FUMAR

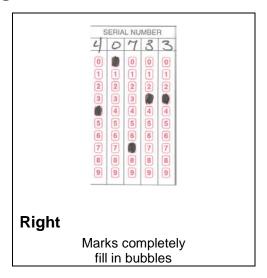
SECTION 823.12, F.S., SMOKING IN ELEVATORS UNLAWFUL-IT IS UNLAWFUL FOR ANY PERSON TO POSSESS ANY IGNITED TOBACCO PRODUCT OR OTHER IGNITED SUBSTANCE WHILE PRESENT IN AN ELEVATOR. ANY PERSON WHO VIOLATES THIS SECTION IS QUILTY OF A MISDEMEANOR OF THE SECOND DEGREE, PUNISHABLE AS PROVIDED IN 5.776.082, 5.776.083.

5.006, FAC 2012 October 8

### Tips for Marking the Report "Bubbles"

You must complete inspection forms in their entirety, with clear, full marks indicated with a black pen (please, no felt tip markers). In addition, we prohibit staples and paper clips since they interfere with proper scanning. Photocopies, incomplete forms, torn or mutilated forms, or forms that do not scan because they were improperly printed by another vendor may be returned to the inspector for resubmittal on the original form, which will in turn delay prompt posting of inspection data.

#### **Example of proper marking:**



### **Examples of improper marking:**

