



# Acceptance & Category 5 Periodic Tests

## ASME A17.1 Section 8.11

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City of Madison Fire Dept.  
 Fire Prevention Div.  
 Elevator Inspection Unit  
 325 W. Johnson St.  
 Madison WI 53703  
 Phone: (608) 266-5909  
 Fax: (608) 267-1153  
[www.madisonfire.org](http://www.madisonfire.org)

**Instructions:** Please TYPE or PRINT CLEARLY the information requested on this form.  
 Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04 (1)(m), Stats.]

Building Name	Owners Name	Registration Tag No.
Street Address	Address	Regulated Object ID.
City, State, Zip	City, State, Zip	Manufacturer

1	Type	Passenger: <input type="checkbox"/> Freight: <input type="checkbox"/>	<input type="checkbox"/> Electric Traction <input type="checkbox"/> Hydraulic <input type="checkbox"/> Sidewalk <input type="checkbox"/> Private Residence Elevator <input type="checkbox"/> Hand Elevator <input type="checkbox"/> Dumbwaiter <input type="checkbox"/> Material Lift <input type="checkbox"/> Special Purpose Personnel Elevator <input type="checkbox"/> Inclined Elevator <input type="checkbox"/> Rack-and-Pinion Elevator <input type="checkbox"/> Limited-Use/Limited-Application Elevator						
2	Rated Capacity	lbs.	Operating Speed (up)	Operating Speed (down)	Leveling Speed:				
3	8.11.2.3.3 Oil Buffers: Car: <input type="checkbox"/> Counterweight: <input type="checkbox"/>			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
3a	Remarks:								
4	8.11.2.3.4 Braking System (125% rated load).			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
4a	Remarks: Table 8.11.2.3.4 Class C2 service test up to 150% rated load								
5	8.11.2.3.5 Emergency and Standby Power Operation (with 125% rated load)			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
5a	Remarks:								
6	8.11.2.3.6 Emergency Terminal Stopping and Speed Limiting Devices.			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
6a	Remarks:								
7	8.11.2.3.7 Power Opening of Doors.			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
7a	Remarks:								
8	8.11.2.3.8 Leveling Zone and Leveling Speed.			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
8a	Remarks:								
9	8.11.2.3.9 Inner Landing Zone.			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
9a	Remarks:								
10	8.11.2.3.10 Emergency Stopping Distance (with 125% rated load).			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
10a	Remarks:								
11	8.11.3.4.2 Coated Ropes			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
11a	Remarks:								
12	8.11.3.4.3 Wire Rope Fastenings			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
12a	Remarks:								
13	8.11.3.4.4 Plunger Gripper (with rated load)			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
13a	Remarks:								
14	8.11.3.4.5 Overspeed Valve(s) (with rated load)			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
14a	Remarks:								
15	8.11.2.2.6 Firefighter's Emergency Operations			Is test satisfactory?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>	Date of Test:			
15a	Remarks:								
16	ASME A17.1 Requirement 8.11.1.6: A metal test tag with the test date, the requirement number requiring the test, and the name of the person or firm performing the test shall be installed in each machine room. <b>Test shall also be recorded in the Maintenance Record.</b>								

The Above Tests Were Performed In Compliance With ASME A17.1 and Comm. 18			
Firm Performing Tests	Address	City, State, Zip	Date of Test Submission
Name and License Number of Person Performing Tests (Print)		Signature of Person Performing Tests	

**Reports Shall Be Filed With the Madison Fire Dept. Once Per Calendar Year.**  
**Copy Distribution: One copy to be retained by firm or person performing test**  
**One copy to be sent to the Madison Fire Dept.**  
**One copy to be retained by owner or tenant**