

Appendix

The material contained in this Appendix is for clarification purposes only. The following are examples of forms SB-22 - Application to Erect or Remodel, SB-2D - Elevator Inspection, SB-2E - Test Report, and SB-252 - Certificate for Operation. Also included is the fee schedule for elevators, power dumbwaiters, escalators, moving walks and ramps, and lifts for the physically disabled.

APPLICATION TO ERECT OR REMODEL (A)

PASSENGER ELEVATOR	RESCUE ELEVATOR	LIFT FOR PLY DIS	STAIR LIFT	DUMBWAITER	SPEEDWALK	ESCALATOR	EPL PURPOSE ELEVATOR	MATERIAL LIFT
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Application is hereby made to the Department of Industry, Labor and Human Relations for permission to ERECT REMODEL the item indicated above in accordance with the following detailed permit and attached plans, and subject to the orders of the Department. The application will include details herein set forth and also include all orders as required by the statute code of the Department.

NOTE: Plans MUST include ALL of the following:

- 1) Horizontal plan of car and hoistway.
 - 2) Sectional elevation of hoistway, penthouse (showing machinery) and pit.
 - 3) Plans of machine and supports, showing details of materials, size and bearing rate of beams, etc.
- If the hoistway has more than one entrance on any floor, all entrances must be clearly shown. (Typical entrances must be so noted.)

DATE OF CONTRACT

Name of User		IF USER IS NOT THE OWNER		Name of Owner	
Street		Street		Street	
City		City		State	
Zip		Zip		Zip	
Building Use (or Occupancy)		COMPLETE THIS SECTION		DATE OF CONTRACT	
Type of Elevator		Rated Tonnage		Rated Speed	
Stops		Hoistway, Size		Car, Size	
Hoistway Door, Type		No. of Doors		How Doors Operate?	
Staircase or Railing Car?		No. of Landing Gates		No. of Landing Cars	
Car Gates or Doors?		Electric Control		Power Operated	
Touchless		Bumperless		Oil Lubricated	
Lifted Buffers		Size of Buffers		No. of Buffers	
Signal Systems		Emergency Call Bell		2 Way Conversation Outside Hoistway	
Emergency Call Bell		Communication or Signal		Fire, Police or Dispatch Service	
Machine Location		Type and Make		Kind of Power	
Voltage		Amperes		Circuit	
Phase		Control		Servies, Disconnect Switch	
Break Type		Lump Sum Total		Car Top Operating Device	
Cables, Hoisting Number		Size Cables		Material, Cables	
Safety Device, Type		Manufacturer's No.		Speed Governor, Type	
Weight of Car with Rated Load		Hydraulic Pressure		Elevator Manufacturer	
Unit is Controlled by		In Wisconsin Registration Number		Name and Address of Architect, if any	
Total Cost to Purchaser		Per Examination Fee is 1% of Total Cost		Fee Submitted	
TOTAL COST X 1% =		SIGNED		DATE	



State of Wisconsin

TELEPHONE 608 267-9506
 8-105 12 (11 10)
 58-22 (R 7-22)

DEPARTMENT OF INDUSTRY, LABOR AND HUMAN RELATIONS
 Division of Safety & Building
 P.O. Box 7969
 Madison, Wisconsin 53707

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DEPARTMENT OF INDUSTRY, LABOR AND HUMAN RELATIONS
SAFETY AND BUILDINGS DIVISION
P.O. BOX 7969
MADISON, WISCONSIN 53707

TEST REPORT
OF
SAFETY DEVICE AND GOVERNOR IN COMPLIANCE
WITH
ELEVATOR CODE SECTIONS IND 4.64 and IND 4.65

SAFETY TEST RUN-AWAY TEST

City _____ Firm _____ State Registration No. _____

Occupant _____

Owner or Agent _____ Address _____

1. Car capacity _____ lbs. Speed _____ F.P.M. Pass. () Fit. ()

2. Type of Machine Drum () Traction () Manufacturer of Safety _____
Manufacturer of Governor _____

3. Type safety: (Instantaneous), (Wedge clamp), (Gradual wedge clamp), (Flexible guide clamp), (Combination
Instantaneous and Oil Buffer).

4. Before the safety test is made the governor _____ be checked for correct tripping speed. Governor set to trip
at _____ Car Speed _____

5. Was safety tested with control load _____ Pounds Tested? _____

6. Governor Rope: (Manila), (6 x 19), (8 x 19), (), (Iron or Steel), Size _____
Condition of governor rope or cable after test _____

7. Length of marks on guide rails made by safety jaws IR, H, Ra-1 _____"
IL, H, Ra1 _____"

8. Did car (set level)? _____ (Set out of level)? _____ Inches _____

9. Did governor set satisfactorily? _____ Remarks _____

10. Did safety test prove satisfactory? _____ Remarks _____

11. Was the tag fastened to the governor (base carrier) _____

The above safety and governor tests were made in compliance with the Wisconsin Administrative Code Sections Ind 4.64
and 4.65 and proved satisfactory.

Date _____ Firm performing test _____

Signature _____

REPORTS SHALL BE FILED WITH THE DEPARTMENT OF INDUSTRY, LABOR AND HUMAN RELATIONS WITHIN
FIFTEEN (15) DAYS AFTER DATE OF TEST.

Green ink to be used for firm and person performing tests.
File copy to be sent to the Safety & Buildings Division, P.O. Box 7969, Madison, Wisconsin 53707.
Reference to be made to this code or test.

DEPARTMENT OF
INDUSTRY, LABOR & HUMAN RELATIONS

CERTIFICATE FOR OPERATION

OF
ELEVATOR, POWER DUVBWAITER, SPEED WALK, SPEED RAMP
OR ESCALATOR

THIS IS TO CERTIFY THAT
THE HEREIN DESCRIBED EQUIPMENT MEETS APPLICABLE SAFETY STANDARDS
OF THE WISCONSIN ADMINISTRATIVE CODE CHAPTER IND. 4


DESCRIPTION
OF
EQUIPMENT

INSPECTED BY

ISSUED TO.

ISSUED BY.

E. C. Lawry
Division of Safety & Building



SAMPLE

Ind 4

**FEE SCHEDULE FOR ELEVATORS, POWER DUMBWAITERS,
ESCALATORS, MOVING WALKS AND RAMPS AND LIFTS
FOR THE PHYSICALLY DISABLED**

Ind 69.06 Elevators, power dumbwaiters, escalators, moving walks and ramps, personnel hoists, lifts for the physically disabled and material lifts. (1) **PLAN EXAMINATION AND APPLICATION FEES.** Fees for the examination of plans or application or both submitted in accordance with the requirements of ch. Ind 4, shall be determined at the rate of 1% of the cost to the purchaser, excluding building construction. The minimum fee shall be \$35.00.

(2) **INSPECTION FEES.** Inspection fees for new installations, periodic inspections, and reinspections shall be determined in accordance with Table 69.06-1.

Table 69.06-1

Type of Inspection	Fee
Initial Inspection of New Installation	
Class 1, 2, 3, 6 and 7 (4 landings or less)	\$70.00
Each additional landing	\$ 5.00
Each unit with phase I emergency recall operation.....	\$38.00
Class 2A and 5	\$38.00
Class 4 and 8 (see fees for special inspections specified in s. Ind 69.14)	
Reinspections of New Installations to Determine Compliance	
Class 1, 2, 3, 4, 6, 7 and 8	\$38.00
Class 2A and 5	\$22.00
Periodic inspection	
Class 1, 2, 3, 6 and 7 (4 landings or less)	\$27.00
Each additional landing	\$ 5.00
Class 2A and 5	\$22.00
Class 4 and 8 (see fees for special inspections specified in s. Ind 69.14)	
Reinspection of Periodic Inspections to Determine Compliance	\$22.00

Note #1: The following is an identification of the various classes used in Table 69.06-1.

- Class 1—Freight elevators (single belt, double belt and cable controlled elevators) sidewalk elevators, sidewalk type elevators and grade level elevators;
- Class 2—Passenger and all other freight elevators not in Class 1;
- Class 2A—Lifting devices used by the physically disabled;
- Class 3—Material lifts;
- Class 4—Personnel hoists;
- Class 5—Hand power elevators;
- Class 6—Dumbwaiters (power);
- Class 7—Escalators, moving walks and moving ramps per unit. A single section having a travel of one floor defines an escalator unit;
- Class 8—Special purpose personnel elevators.

Note #2: Any elevator or dumbwaiter classification may be identified by number of landings. Example: A 6-landing passenger elevator would be classified as class 2-6.

(3) CERTIFICATE OF OPERATION. The certificate fee shall be determined in accordance with Table 69.06-2.

Table 69.06-2

Inspection Performed by	Fee per certificate
Authorized inspector employed by the department.....	\$16.00
Certified inspector employed by an insurance company or agency	\$22.00