



# Category 5 Test Report

ASME 17.1a 2004, Req. 8.11.2.3 Electric Elevators

Department of Consumer & Business Services  
Building Codes Division • Elevator Safety Program  
1535 Edgewater NW, Salem, OR  
Mailing address: P.O. Box 14470, Salem, OR 97309-0405  
(503) 373-1298, Fax: (503) 378-4101  
Web: bcd.oregon.gov

Refer to ASME A17.2 for testing procedures

Individual or firm performing tests:		OEM:	
Site name:		Building ID:	State ID:
Rated speed: _____ <input type="checkbox"/> m/s <input type="checkbox"/> fpm	Rated load: _____ <input type="checkbox"/> kg <input type="checkbox"/> lb	Test due (mm/yy): _____/_____/_____	Code date (mm/yy): _____/_____/_____
<b>CAR AND COUNTERWEIGHT SAFETIES — A17.1, Req. 8.11.2.3.1 and A17.2, Item 2.29; refer to Tables 2.29.2(a)-(e)</b>			
Test date: ____/____/____	Guide rails: <input type="checkbox"/> Steel <input type="checkbox"/> Wood	Type: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> Broken/slack rope	Cwt. safeties: <input type="checkbox"/> Not applicable
Machine type: <input type="checkbox"/> Traction <input type="checkbox"/> Drum <input type="checkbox"/> Roped hydraulic	Overall condition (describe on separate report): <input type="checkbox"/> Good <input type="checkbox"/> Repairs/adjustment before test <input type="checkbox"/> Repairs/adjustment after test		
Actual stopping distances: Minimum _____ <input type="checkbox"/> mm <input type="checkbox"/> in. Maximum _____ <input type="checkbox"/> mm <input type="checkbox"/> in.		Slide: _____ <input type="checkbox"/> mm : <input type="checkbox"/> in.	Test tags affixed? <input type="checkbox"/> Yes
<b>GOVERNORS — A17.1, Req. 8.11.2.3.2 and A17.2, Item 2.13; refer to Tables 2.13.2</b>			
<b>Car governor</b> ( <input type="checkbox"/> Test tag affixed)		<b>Counterweight governor</b> ( <input type="checkbox"/> Test tag affixed)	
Tripping speeds: <input type="checkbox"/> ms or <input type="checkbox"/> fpm	Gov. rope size _____ mm in.	Breaking strength: _____ kg. lb.	Tripping speeds: <input type="checkbox"/> ms or <input type="checkbox"/> fpm
Switch: _____ N lbf	Pull-through: _____ N lbf	Pull-out: _____ N lbf	Switch: _____ N lbf
Jaws: _____	Cannot exceed 20% of governor-rope breaking strength	Cannot exceed 60% of pull-through	Jaws: _____
Governor type: <input type="checkbox"/> Centrifugal <input type="checkbox"/> Flyball <input type="checkbox"/> Overhead flyball <input type="checkbox"/> Horizontal shaft <input type="checkbox"/> Other: _____		Governor type: <input type="checkbox"/> Centrifugal <input type="checkbox"/> Flyball <input type="checkbox"/> Overhead flyball <input type="checkbox"/> Horizontal shaft <input type="checkbox"/> Other: _____	
<b>OIL BUFFERS — A17.1, Req. 8.11.2.3.3 and A17.2, Items 3.28 and 5.12</b>			
Car buffers: _____ Refer to 8.11.2.3(b) and (c) <input type="checkbox"/> Test tag affixed <input type="checkbox"/> Tested at rated speed with rated load in car		Counterweight buffers: _____ Refer to 8.11.2.3(b) and (c) <input type="checkbox"/> Test tag affixed <input type="checkbox"/> Tested at rated speed with rated load in car	
Buffer switch operation: <input type="checkbox"/> OK <input type="checkbox"/> Repair/adjust	Oil level: <input type="checkbox"/> OK <input type="checkbox"/> Add oil _____ in.	Runby: _____ in.	Buffer switch operation: <input type="checkbox"/> OK <input type="checkbox"/> Repair/adjust
<b>BRAKING SYSTEM — A17.1, Req. 8.11.2.3.4 and A17.2, Item 2.17; refer to Table 8.11.2.3.4</b>			
125% rated-load test: <input type="checkbox"/> Passed <input type="checkbox"/> Adjusted/repared & retested	Class C-2 loading: <input type="checkbox"/> Maintained level car	Safely lowered and stopped with 125% of rated load: <input type="checkbox"/> Passenger elevator <input type="checkbox"/> Freight allowed to carry passengers	
<b>EMERGENCY AND STANDBY POWER OPERATION — A17.1, Req. 8.11.2.3.5 and A17.2, Item 1.17</b>			
<input type="checkbox"/> 125% of rated load	<input type="checkbox"/> Rated load only	<input type="checkbox"/> Adjusted/repared and retested	<input type="checkbox"/> Passed
<b>EMERGENCY TERMINAL STOPPING, SPEED-LIMITING DEVICES — A17.1, Req. 8.11.2.3.6 and A17.2, Item 2.28</b>			
<input type="checkbox"/> Bottom terminal run at rated speed	<input type="checkbox"/> Top terminal run at rated speed	<input type="checkbox"/> Adjusted/repared and retested	<input type="checkbox"/> Passed
<b>POWER OPENING OF DOORS — A17.1, Req. 8.11.2.3.7 and A17.2, Item 1.10</b>			
<input type="checkbox"/> Doors open only in landing zone		<input type="checkbox"/> Doors open only within 300 mm (12 in.) of floor (static drive)	
<b>EMERGENCY STOPPING DISTANCE — A17.1, Req. 8.11.2.3.10</b>			
<input type="checkbox"/> Rope slip	<input type="checkbox"/> Drive stalled	125% rated-load test: <input type="checkbox"/> Adjusted/repared and retested	<input type="checkbox"/> Passed
<b>LEVELING ZONE, LEVELING SPEED, INNER-LANDING ZONE — A17.1, Req. 8.11.2.3.8-9 and A17.2, Table 1.10.2</b>			
Unlocking/inner landing zone: _____ mm in. <input type="checkbox"/> NA	Leveling zone, non-static drive: _____ mm in. <input type="checkbox"/> NA	Leveling zone, manual: _____ mm in. <input type="checkbox"/> NA	Landing/unlocking zone: _____ mm in. <input type="checkbox"/> NA
Leveling zone, static drive: _____ mm in. <input type="checkbox"/> NA	Truck zone: _____ mm in. <input type="checkbox"/> NA		