



Request for Temporary Certificate of Operation

John R. Kasich
Governor

State of Ohio, Department of Commerce
Elevator Inspection Section
6606 Tussing Road • P.O. Box 4009
Reynoldsburg, OH 43068-9009 Phone 614-644-2223 Fax 614-644-3580
www.com.state.oh.us

David Goodman
Director

**Mail the appropriate fees to the address listed above.
Requests are subject to final approval by the chief elevator inspector.**

Unit number(s)

| | | | | | |
|--|--|--|--|--|--|
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|--|--|--|--|--|--|

Location of Elevator

Building Name: _____ County _____

Address: _____ City: _____ Zip _____

Company Applying for the permit

Same as Location

Company: _____ Contact Person: _____

Telephone: _____ Fax: _____

Address: _____ City: _____ State _____ Zip _____

Company who holds the Installation Permit

Same as Owner

Same as Location

Company: _____ Contact Person _____

Phone: _____ Fax: _____

Request is: (circle one)

Initial

Extension

Length of Request: (circle one)

\$53.25 - \$103.25 - \$153.25

30 days

60 days

90 days

Unit is: (circle one)

New Construction

Alteration

The Intended use of the Elevator is for: (circle one)

Construction Purpose only

General Public

List of Violation not completed

This space for Elevator Section Only:

Approved

Rejected

by: _____ Date: _____