



Removing an Elevator or Escalator from Service

Form must be submitted within 5 days of the completion of the removal
Sent electronically to: Email: elevators@com.ohio.gov Fax: 614-644-2428

The state of Ohio has adopted the American Society of Mechanical Engineers Standard (ASME) A17.1 as the code by which Ohio will regulate lifting devices. Should you desire to permanently remove a lifting device from service, ASME 17.1 procedures follow:

ASME A17.1 -8.11.1.4 Installation Placed Out of Service.

Periodic inspections and tests shall not be required when an installation is placed "out of service":

- (a) as defined by the authority having jurisdiction; or
- (b) when an installation whose power feed lines have been disconnected from the mainline disconnect switch; and
 - (1) an electric elevator, dumbwaiter, or material lift whose suspension ropes have been removed, whose car and counterweight rest at the bottom of the hoistway, and whose hoistway doors have been permanently barricaded or sealed in the closed position on the hoistway side;
 - (2) a hydraulic elevator, dumbwaiter, or material lift whose car rests at the bottom of the hoistway; when provided with suspension ropes and counterweight, the suspension ropes have been removed and the counterweight rests at the bottom of the hoistway; whose pressure piping has been disassembled and a section removed from the premises and whose hoistway doors are permanently barricaded or sealed in the closed position on the hoistway side; or
 - (3) an escalator or moving walk whose entrances have been permanently barricaded

Please complete the following and submit per instructions above. A scheduled inspection is required once the following items have been completed. Field staff will confirm the unit is out of service. No additional invoicing for inspections will accrue while the elevator is out of service. Contact scheduling once complete at 614-644-2223

Owner ID #:		State ID #:	
Location:		Address:	
City:	Zip:	Phone:	County:

Company Performing the work:		Person Performing work: print	
Address:		City:	Zip:
Phone:	Email:	Signature:	
			Date:

Type of Unit (check one)			
<input type="checkbox"/>	Passenger	<input type="checkbox"/>	Sidewalk Freight
<input type="checkbox"/>	Freight	<input type="checkbox"/>	Stage Lift
<input type="checkbox"/>	LULA	<input type="checkbox"/>	Escalator
<input type="checkbox"/>	Dumbwaiter	<input type="checkbox"/>	Platform Lift
<input type="checkbox"/>	Special Service	<input type="checkbox"/>	Chair Lift
<input type="checkbox"/>	Other:		

Type of Driving Means (check one)			
<input type="checkbox"/>	Traction	<input type="checkbox"/>	Chain & Sprocket
<input type="checkbox"/>	Winding Drum	<input type="checkbox"/>	Screw
<input type="checkbox"/>	Direct Hydraulic	<input type="checkbox"/>	Other:
<input type="checkbox"/>	Roped Hydraulic		
<input type="checkbox"/>	Rack & Pinion		
<input type="checkbox"/>	Belt		

Yes	No	NA	Complete all applicable questions below:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fuses and power feed lines removed from the mainline disconnect to the controller.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The car and counterweight lowered to the pit area.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The suspension ropes detached and the counterweight lowered to the pit. (Traction type)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A section of pipe removed from the property. (Hydraulic type)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All hoistway doors are permanently barricaded or sealed in the closed position on the hoistway side, either by bolting/welding the doors closed or walling off the doors from the lobby side by the use of 3/4 inch plywood on 16"-oc studs.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Escalator or moving walk whose entrances have been permanently barricaded