

# ELEVATOR VISUAL INSPECTION CHECKLIST

ASME A17.1-2025 / CSA B44-2025

Safety Code for Elevators and Escalators · Commercial Building Application

Machine Room

Hoistway

Cab Interior

Doors & Landings

Emergency Communication

Accessibility

Safety Devices

## INSPECTION INFORMATION

Building / Property Name: \_\_\_\_\_

Inspector Name: \_\_\_\_\_

Address: \_\_\_\_\_

License / Cert. No.: \_\_\_\_\_

Elevator ID / Unit No.: \_\_\_\_\_

Agency / Company: \_\_\_\_\_

Type (Traction/Hydraulic/MRL): \_\_\_\_\_

Report No.: \_\_\_\_\_

Inspection Date: \_\_\_\_\_

AHJ / Jurisdiction: \_\_\_\_\_

Weather / Conditions at Time of Inspection: \_\_\_\_\_

This checklist is for VISUAL inspection reference only. Results do not substitute for a full code-compliance inspection by a licensed elevator inspector. Always verify applicable adopted edition and local AHJ amendments. ASME A17.1-2025 applies to new installations; ASME A17.3 governs existing equipment.

## INSTRUCTIONS & LEGEND

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**Purpose:** This checklist guides qualified elevator inspectors through a structured visual inspection of commercial passenger elevators per ASME A17.1-2025 / CSA B44-2025. It does not replace a full statutory inspection.

**Scope:** Applicable to traction and hydraulic passenger elevators in commercial buildings. Not intended for escalators, moving walks, or residential private-residence elevators.

**Adopted Edition:** Confirm the edition adopted by the AHJ (Authority Having Jurisdiction). A17.1-2025 applies to new installations; ASME A17.3 governs minimum requirements for existing equipment.

**Marking:** Mark PASS or FAIL for each item. If an item is not applicable, write N/A in the Notes column. Items left blank will be treated as uninspected.

**Photos:** Photo reference fields indicate where photographic documentation is especially recommended. Attach labeled photos to the inspection record.

**Deficiencies:** Any FAIL item must be documented in detail and reported to the building owner / responsible party. Immediately dangerous conditions require elevator removal from service.

**Signature:** The completed checklist must be signed and dated by the responsible inspector. Retain per AHJ record-keeping requirements.

SYMBOL	MEANING
PASS	Item meets code requirements as observed — no deficiency noted.
FAIL	Item does not meet code requirements or could not be verified — document in notes and report.
N/A	Not applicable to this installation — note reason.
[PHOTO]	Photographic documentation strongly recommended for this item.

Referenced Standards: ASME A17.1-2025 / CSA B44-2025 Safety Code for Elevators and Escalators · ASME A17.2-2023 Guide for Inspection of Elevators · ASME A17.3 Safety Code for Existing Elevators · ADA Standards for Accessible Design 28 CFR Part 36 §4.10 · NFPA 70 NEC Article 620 · IBC §3001-3009 · OSHA 29 CFR 1910.23

**1 MACHINE ROOM & MACHINERY SPACES** ASME A17.1 §2.7 / §3.7

PASS	FAIL	INSPECTION ITEM	NOTES / OBSERVATIONS
<input type="checkbox"/>	<input type="checkbox"/>	Machine room / machinery space access is restricted to authorized elevator personnel only; door is self-closing, self-locking, and labeled 'MACHINE ROOM — NO ADMITTANCE' Ref: §2.7.3.1 / §2.7.3.4	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Machine room door is fire-rated as required by applicable building code and AHJ Ref: §2.7.1.1.2 / IBC §3005.4	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Minimum clear headroom of 7 ft (2135 mm) is maintained throughout the machine room / machinery space Ref: §2.7.4	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Machine room is not used for storage of non-elevator equipment, tools, or materials Ref: §2.7.8	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Lighting is adequate — minimum 19 foot-candles (200 lux) at floor level; all fixtures functional Ref: §2.7.9.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Temperature is maintained between 50°F–104°F (10°C–40°C); no evidence of excessive heat or humidity Ref: §2.7.9 / Mfr. specs	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Machine room is free of water intrusion, condensation, and standing water Ref: §2.7.8	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Ventilation is adequate; no fumes, excessive dust, or combustible vapors present Ref: §2.7.9.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] Driving machine (motor, brake, sheave) — no visible leaks, unusual wear, or damage Ref: §2.7.4 / §2.24	_____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Drive sheave grooves show acceptable wear; ropes are properly seated in all grooves Ref: §2.20.9 / ASME A17.2	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Traction steel wire ropes — no broken wires, kinks, bird-caging, corrosion, or lubrication deficiency Ref: §2.20.3 / App. T	_____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Governor rope is in good condition; governor seals/marks intact if present Ref: §2.18.5	_____ _____

<input type="checkbox"/>	<input type="checkbox"/>	<p>Motor controller is labeled, panels are closed, no exposed live conductors; electrical working clearances (<math>\geq 30</math> in.) maintained per NFPA 70 Art. 620                      Ref: §2.26.1 / NEC 620.5</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Mainline disconnect switch is readily accessible, labeled, and functional; lockout provisions present                      Ref: §2.26.2 / NEC 620.51</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>All electrical panels and junction boxes are labeled and covers are secured                      Ref: NEC 620.52 / §2.26</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Fire extinguisher is present, properly rated (Class C), mounted, charged, and within annual inspection date                      Ref: §2.7.8 / Local fire code</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Maintenance log / inspection records are present, current, and available for AHJ review                      Ref: §8.6 / §8.11</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Machine room EMERGENCY STOP switch is properly labeled, accessible, and tested                      Ref: §2.26.1.6</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>[PHOTO] Code data plate / code compliance plate is posted and legible                      Ref: §8.9 / NEC 620.52</p>	<p>_____</p> <p>_____</p>

MACHINE ROOM NOTES:

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**2 HOISTWAY** ASME A17.1 §2.1 / §2.2 / §2.7

PASS	FAIL	INSPECTION ITEM	NOTES / OBSERVATIONS
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] Hoistway enclosure is fire-rated per building code; no cracks, holes, or openings other than permitted Ref: §2.1.1 / IBC §3005.4	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Hoistway illumination is functional — minimum 10 fc (108 lux) at top, bottom, and at each floor level; permanent fixtures properly located (A17.1-2022 illumination update) Ref: §2.2.3 / §2.1.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Pit is clean, dry, and free of accumulations of oil, grease, or debris Ref: §2.2.4.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Pit lighting is operational — minimum 10 fc at pit floor; light switch accessible from pit access door Ref: §2.2.5.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] Pit access door / ladder: self-closing, self-locking door or stairway; ladder secured and in good condition Ref: §2.2.4.2 / §2.2.4.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Pit STOP SWITCH is present, accessible within 2 ft of pit access door, labeled, and tested functional Ref: §2.2.4.4	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Pit depth provides required clearance for buffers and compensation equipment; no unauthorized equipment in pit Ref: §2.2.1 / §2.2.2	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Buffer(s) in pit — oil or spring type — no visible damage, leakage (oil buffers), or corrosion; buffer return spring/plunger appears functional Ref: §2.22 / §3.22	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Counterweight buffer(s) in good condition — same as above Ref: §2.22.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Elastomeric buffers (if present): inspect per A17.1-2025 new elastomeric buffer requirements Ref: §2.22 (2025 update)	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Overhead clearance (top-of-car refuge space): minimum 24 in. vertical clearance above car top verified per code; no obstructions to governor rope or car top Ref: §2.4.7 / §2.4.8	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Top-of-car clearance lighting and stop switch are accessible and functional Ref: §2.7.5	_____ _____

<input type="checkbox"/>	<input type="checkbox"/>	<p>Hoistway door interlocks on all landing doors — prevent car movement unless all non-car-adjacent landing doors are closed and locked; no bypasses</p> <p>Ref: §2.12.6 / §2.12.7</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>[PHOTO] Landing sill condition: each sill is clean, level, firmly anchored; gap between hoistway door and sill edge does not exceed 3/4 in. (3/4 × 4 rule)</p> <p>Ref: §2.11.4 / §2.12.1</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Hoistway door panels — no visible damage, warping, or gaps exceeding 3/8 in. between door panels or door and jamb</p> <p>Ref: §2.11.3 / §2.12.1</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Door position monitoring is present and functional (2022 code update — Phase II firefighter service)</p> <p>Ref: §2.27 (2022 update)</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Flood protection provisions present where applicable (2022 code addition)</p> <p>Ref: §2.2.8 (2022 update)</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Seismic provisions (where applicable): seismic switch, car guide rails, and fasteners inspected per ASME A17.1-2025 seismic requirement updates</p> <p>Ref: §8.4.10 (2025 update)</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Emergency responder radio coverage equipment in hoistway is verified per 2022/2025 code addition</p> <p>Ref: §2.7.12 (2022/2025)</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>Guide rails and brackets: no visible damage, misalignment, or missing fasteners</p> <p>Ref: §2.23.4</p>	<p>_____</p> <p>_____</p>

HOISTWAY NOTES:

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**3 CAB INTERIOR**

ASME A17.1 §2.14 / §2.15

PASS	FAIL	INSPECTION ITEM	NOTES / OBSERVATIONS
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] Car enclosure: walls and ceiling — no cracks, missing panels, delamination, or loose fixtures Ref: §2.14.1 / §2.15.5	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Floor covering: no buckling, gaps, lifted edges, or trip hazards; flame spread and smoke density ratings meet ASME A17.1-2.14.2 (certified/tested) Ref: §2.14.2.1 / §2.14.2.2	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	All interior wall and ceiling materials carry required fire/smoke certifications for their end-use configuration Ref: §2.14.2.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Glass used in cab (if any): meets ASME A17.1-2.14.1.8 marking requirements and is free of cracks or chips Ref: §2.14.1.8	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] Cab lighting: minimum 5 fc (54 lux) at floor level; all fixtures operational; no exposed wiring Ref: §2.14.4 / §2.7.9.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Emergency lighting: activates automatically on power failure within 10 seconds; minimum 4-hour duration Ref: §2.27.2 / §2.14.4.2	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Ventilation: fan or blower operational; adequate airflow for rated capacity; no unusual noise Ref: §2.14.4.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Car capacity / rated load placard is posted in the car, is legible, and matches rated load Ref: §2.16.3 / §8.9	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Current Certificate of Inspection is posted in the car, visible to passengers, and not expired Ref: §8.10 / AHJ requirement	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Control panel buttons, displays, and floor position indicators are all operational Ref: §2.26.4 / §2.16	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Emergency STOP switch is accessible, labeled, and functional (where required by AHJ) Ref: §2.26.1.6	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Car operating panel (COP): buttons for all served floors are present, legible, and functional; raised tactile characters and Braille on all buttons per ADA Ref: §2.26.4 / ADA §4.10.12	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] Car phone / two-way emergency communication: see Section 5 for detailed requirements Ref: §2.27.1 (see Sec. 5)	_____ _____

<input type="checkbox"/>	<input type="checkbox"/>	Alarm bell or audible signal button is present, accessible, and activates an audible alarm outside the hoistway Ref: §2.27.1.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Handrail (if provided): securely mounted, continuous, no sharp edges; height meets ADA requirements Ref: ADA §4.10.9 / §2.14.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Fire service instructions placard is posted per ASME A17.1-2.27.7.1 and is legible Ref: §2.27.7.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Emergency identification number is posted at each landing door and in the car per code Ref: §2.16 / NEC 620.52	_____ _____

CAB INTERIOR NOTES:

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4 DOORS & LANDING CONDITIONS

ASME A17.1 §2.11 / §2.12 / §2.13

PASS	FAIL	INSPECTION ITEM	NOTES / OBSERVATIONS
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] Car doors: no visible damage, warping, excessive wear, or dents on panels Ref: §2.11.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Car door closing force does not exceed 30 lb (133 N) as measured at the leading edge Ref: §2.13.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Door reopening device: mechanical safety edge or electronic detector is present, functional, and retracts doors on contact with any object; no bypasses Ref: §2.13.4 / §2.13.5	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Door open dwell time (delay before closing) is adequate — minimum 5 seconds for main floor per ADA Ref: ADA §4.10.7	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] Door clear opening width: minimum 36 in. (914 mm) when fully open (ADA) Ref: ADA §4.10.6 / §2.11.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Car gate / door: sill-to-sill gap (3/4 × 4 rule) — gap between hoistway door and car door does not exceed 3/4 in.; rejects 4-in. sphere Ref: §2.11.4 (A17.1-2017+)	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Door interlock at every landing: landing doors cannot be opened from the landing side without a key when car is not present (or within code-specified zone); all interlocks verified Ref: §2.12.6 / §2.12.7	_____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Landing door gibs / guides are in place, undamaged, and restrict door movement to designed path Ref: §2.11.5	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] Landing sill at each floor: clean, level, anchored; no raised edges, cracks, or obstructions; gap ≤ 3/4 in. between sill and car sill at level stop Ref: §2.11.4 / §2.12.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Car leveling: car stops within ±0.5 in. (12 mm) of landing floor level under loaded and unloaded conditions Ref: §2.26.9.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Door restrictors / car door restrictor device: prevents opening beyond 4 in. (102 mm) unless car is within landing zone; functional Ref: §2.12.8	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Emergency access (hoistway door key): at least one key wrench available; key switches functional; key access restricted to authorized personnel Ref: §2.12.3 / §2.27.5	_____ _____

<input type="checkbox"/>	<input type="checkbox"/>	Phase I firefighter service recall: key switch at main floor lobby functional; car returns to designated recall floor; doors open and remain open Ref: §2.27.3.1	_____ _____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Phase II firefighter service in-car operation: tested per last periodic test record available; in-car key switch functional Ref: §2.27.3.2	_____ _____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	All landing hall call buttons and indicators are functional at each floor landing Ref: §2.26.4 / ADA §4.10.13	_____ _____ _____

DOORS & LANDING NOTES:

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**5 EMERGENCY COMMUNICATION**

ASME A17.1-2025 §2.27.1 / ADA §4.10.14

2025 Code Update: ASME A17.1-2025 expanded emergency communication requirements to ensure passengers with hearing or speech impairments can communicate during entrapment. Elevators must now provide visual/tactile alert capability in addition to audio. Verify AHJ adoption date before applying 2025 requirements to existing equipment.

PASS	FAIL	INSPECTION ITEM	NOTES / OBSERVATIONS
<input type="checkbox"/>	<input type="checkbox"/>	<b>TWO-WAY COMMUNICATION SYSTEM</b> — A code-required two-way voice communication system is installed in the car Ref: §2.27.1.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>[PHOTO]</b> Two-way system connects to a continuously staffed (24/7) monitoring location; auto-dials on activation; call is answered during test Ref: §2.27.1.1 / §2.27.1.4	_____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>HELP / CALL</b> button is present in the car, clearly labeled, and activates the two-way system Ref: §2.27.1.1 / ADA §4.10.14	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>HELP</b> button is illuminated or indicates connection status to user; provides confirmation that call has been received Ref: §2.27.1.3 / ADA §4.10.14	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>VISUAL SIGNAL (2025 update):</b> visual / tactile alert for hearing-impaired passengers — flashing light or on-screen text confirms communication connection when call is placed Ref: §2.27.1 (2025 update)	_____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>TEXT / MESSAGING</b> capability for hearing-impaired and speech-impaired passengers — two-way text messaging using elevator buttons and on-screen display (2025 update / A17.1-2019+) Ref: §2.27.1 (2025 update)	_____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>BACKUP POWER:</b> emergency communication system has independent battery backup; confirmed operational on simulated power failure test Ref: §2.27.1.5	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>Battery backup duration:</b> minimum 4 hours of continuous operation; battery condition indicator (if present) shows adequate charge Ref: §2.27.1.5	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>EMERGENCY ALARM BELL:</b> audible alarm is present, activates from car, and is audible outside the hoistway; battery-backed Ref: §2.27.1.2	_____ _____

<input type="checkbox"/>	<input type="checkbox"/>	<p>[PHOTO] Telephone / communication device is mounted within reach range for passengers; handset or hands-free; no physical damage                      Ref: §2.27.1 / ADA §4.10.14</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>EMERGENCY LIGHTING: activates automatically within 10 seconds of power failure; minimum 5 fc at floor level; minimum 4-hour battery duration                      Ref: §2.27.2 / §2.14.4.2</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>EMERGENCY RESPONDER RADIO COVERAGE: in-building emergency responder radio coverage is verified in hoistway and machine room per 2022/2025 code addition; signal adequate for first responder use                      Ref: §2.7.12 (2022/2025)</p>	<p>_____</p> <p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>VIDEO INTEGRATION (where installed): emergency responder video feed from inside car is functional; camera operational and view unobstructed (2025 guidance)                      Ref: §2.27.1 (2025 guidance)</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>MONTHLY TEST RECORDS: emergency communication system monthly functional test records are present and current per ASME A17.1 maintenance requirements                      Ref: §8.6 / §8.11</p>	<p>_____</p> <p>_____</p>

EMERGENCY COMMUNICATION NOTES:

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**6 ACCESSIBILITY FEATURES**

ADA 28 CFR §4.10 / ASME A17.1 §2.26.4

PASS	FAIL	INSPECTION ITEM	NOTES / OBSERVATIONS
<input type="checkbox"/>	<input type="checkbox"/>	<b>CALL BUTTON HEIGHT:</b> hall call buttons at all landings are mounted between 15 in. and 48 in. above finished floor (AFF) — measured to centerline of button Ref: ADA §4.10.3 / §4.27.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>[PHOTO] CALL BUTTON SIZE:</b> each call button is a minimum of 3/4 in. (19 mm) in its smallest dimension Ref: ADA §4.10.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>CALL BUTTON ILLUMINATION:</b> call buttons illuminate when activated; visual indicator extinguishes on arrival Ref: ADA §4.10.4	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>HALL LANTERN / DIRECTION INDICATOR:</b> visual and audible signal at each landing indicates car arrival direction; audible signal sounds once for UP, twice for DOWN Ref: ADA §4.10.4 / §4.10.13	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>[PHOTO] TACTILE FLOOR DESIGNATIONS:</b> raised characters and Braille on all car operating panel (COP) buttons for floor designations; characters are to left of buttons; minimum 5/8 in. high Ref: ADA §4.10.12.1 / §4.30.4	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>TACTILE FLOOR SIGNS:</b> raised floor designation signs are present on both jambs of each hoistway door at 60 in. AFF to centerline; Braille below raised characters Ref: ADA §4.10.5 / §4.30	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>CAR POSITION INDICATORS:</b> visual and audible position indicator inside car announces each floor; audible signal tone each floor; minimum 1/2 in. high characters Ref: ADA §4.10.13	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>CAB INTERIOR SIZE:</b> minimum clear floor area of 51 in. × 68 in. (1295 mm × 1727 mm) to accommodate wheelchair turning; measured inside car to car door in open position Ref: ADA §4.10.9	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>DOOR CLEAR WIDTH:</b> minimum 36 in. (914 mm) clear width when doors are fully open Ref: ADA §4.10.6	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>FLOOR DESIGNATION:</b> numerals in car and at landings are in compliance with ADA character requirements; main entry floor is designated '1' or 'L' Ref: ADA §4.10.5 / §4.30	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>COP ARRANGEMENT:</b> main car controls (emergency stop, alarm, door open/close) are operable with a closed fist; within reach range; not obstructed Ref: ADA §4.27 / §4.10.12	_____ _____

<input type="checkbox"/>	<input type="checkbox"/>	<p>[PHOTO] MIRROR: full-length mirror or polished panel on rear wall of car to allow wheelchair users to observe door operation; or equivalent</p> <p>Ref: ADA §4.10.11</p>	<hr/> <hr/>
<input type="checkbox"/>	<input type="checkbox"/>	<p>ACCESSIBLE ROUTE to elevator lobby is maintained; floor surface is stable, firm, slip-resistant; no obstructions within 60 in. approach clearance at each landing</p> <p>Ref: ADA §4.3 / §4.5</p>	<hr/> <hr/>

ACCESSIBILITY NOTES:

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## 7 SAFETY DEVICES

ASME A17.1 §2.17 / §2.18 / §2.19 / §2.22

PASS	FAIL	INSPECTION ITEM	NOTES / OBSERVATIONS
<input type="checkbox"/>	<input type="checkbox"/>	[PHOTO] GOVERNOR: governor rope and flyweights are in good condition; governor rope not kinked, frayed, or corroded; governor trip mechanism visible Ref: §2.18.2 / §2.18.4	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Last governor trip test date: within required 5-year (Category 5) test cycle; records available for review Ref: §8.6.4.5 (Cat. 5)	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	SAFETY DEVICE (car safeties): flexible-guide-clamp or instantaneous type as appropriate; no visible damage, corrosion, or missing components Ref: §2.17.2 / §2.17.3	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	Last safety test date: within required periodic test cycle; Category 5 test record present Ref: §8.6.4.5	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	COUNTERWEIGHT SAFETIES (if required by code edition / installation): present, accessible, no damage Ref: §2.17.5	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	COUNTERWEIGHT WARNING SYSTEM (2025 addition): visual and/or audible warning device to alert personnel in pit of counterweight descent; verify per A17.1-2025 new requirements Ref: §2.22 (2025 update)	_____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	BUFFERS — Car side: oil or spring buffers in pit are properly installed; oil level adequate (oil buffers); no visible corrosion, damage, or leakage Ref: §2.22.1 / §2.22.2	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	BUFFERS — Counterweight side: same condition assessment as car-side buffers Ref: §2.22.1	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	ELASTOMERIC BUFFERS (if present, 2025 addition): inspect per ASME A17.1-2025 elastomeric buffer requirements; condition tags, compression marks acceptable Ref: §2.22 (2025 update)	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	LIMIT SWITCHES: normal terminal stopping switches are present and functional (verify from last maintenance record); final limit switches present Ref: §2.25.3 / §2.25.4	_____ _____
<input type="checkbox"/>	<input type="checkbox"/>	BROKEN ROPE / CHAIN / BELT SAFETY DEVICE (hydraulic): if required — present and functional Ref: §3.17.2	_____ _____

<input type="checkbox"/>	<input type="checkbox"/>	<p>HYDRAULIC JACK / CYLINDER (hydraulic elevators): no visible leaks at cylinder, packing, or piping; pit floor free of oil accumulation                      Ref: §3.19 / §3.20</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>HYDRAULIC PRESSURE RELIEF VALVE: presence of relief valve verified; last test date within required cycle                      Ref: §3.21.3</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>PIT GUARDING (2025 addition): protective guards or barriers around pit counterweight areas or moving equipment verified per A17.1-2025 pit guarding requirements                      Ref: §2.2 (2025 update)</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>PROTECTION OF OVERHEAD OPENINGS (2025 addition): openings in machine room floor above hoistway are protected per A17.1-2025 requirements                      Ref: §2.7 (2025 update)</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>FIREFIGHTER SERVICE PHASE I recall: last test date within required annual test cycle; records present                      Ref: §2.27.3 / §8.6</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>FIREFIGHTER SERVICE PHASE II in-car: last test date within required annual test cycle; records present                      Ref: §2.27.3 / §8.6</p>	<p>_____</p> <p>_____</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>ANNUAL / PERIODIC INSPECTION: current inspection certificate posted; last Category 1 test within 12 months; no outstanding unresolved deficiencies from prior inspection                      Ref: §8.6 / §8.10</p>	<p>_____</p> <p>_____</p>

**SAFETY DEVICES NOTES:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## INSPECTION SUMMARY

OVERALL RESULT	PASS	FAIL	CONDITIONAL (See Notes)
Mark overall inspection result →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### DEFICIENCIES IDENTIFIED

No.	Section	Item Description	Severity	Corrective Action Required
1		_____	[ ] Immed. [ ] Mod. [ ] Minor	_____
2		_____	[ ] Immed. [ ] Mod. [ ] Minor	_____
3		_____	[ ] Immed. [ ] Mod. [ ] Minor	_____
4		_____	[ ] Immed. [ ] Mod. [ ] Minor	_____
5		_____	[ ] Immed. [ ] Mod. [ ] Minor	_____
6		_____	[ ] Immed. [ ] Mod. [ ] Minor	_____
7		_____	[ ] Immed. [ ] Mod. [ ] Minor	_____

### PHOTO DOCUMENTATION LOG

Photo #	Description / Location	Section Ref.	File Name / ID
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____

### CERTIFICATION & SIGNATURES

I certify that I have personally performed a visual inspection of the above-described elevator installation on the date indicated, in accordance with applicable provisions of ASME A17.1-2025 / CSA B44-2025 and the requirements of the Authority Having Jurisdiction. All findings are reported truthfully and to the best of my knowledge and professional ability.

Inspector Printed Name: \_\_\_\_\_ License / Cert. No.: \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

Inspector Signature: \_\_\_\_\_ Agency / Employer: \_\_\_\_\_

Reviewed by (Supervisor/QA): \_\_\_\_\_ Review Signature: \_\_\_\_\_ Review Date: \_\_\_\_\_

Building Owner / Representative: \_\_\_\_\_ Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This checklist is a field reference tool for visual inspection only. It does not supersede a full statutory inspection, Category test, or engineer's evaluation. All deficiencies must be communicated to the building owner/operator and the AHJ as required. The inspector bears sole professional responsibility for findings. ASME A17.1-2025 applies to new installations; ASME A17.3 governs retroactive requirements for existing equipment.