



Third Party Periodic Inspection Report

Article-Public Safety Title 12, subtitle 8 requires that all elevator units be inspected periodically in conformance with the applicable sections of the Safety Code (ASME A17.1). Documentation of the periodic inspection performed shall be submitted to the Commissioner of Labor and Industry on this form only.

Site Name:		Date Inspected:
Site Address:		
City:	County:	Zip Code:
Registration Number:		

- The owner was given a **30-day** opportunity to correct any apparent violations.
- Periodic Inspection (ASME A17.1) **Applicable Safety Code &Year** _____
- Re-Inspection (follow-up to Periodic Inspection)
- * Indicate the date of the last **5-Year test:** _____

Elevator **Unit Not in compliance** **Number of Violations Identified:** _____

Escalator

The periodic inspection revealed that the elevator unit is in violation of the Safety Code. The owner of the elevator unit was given a copy of the Inspection Violation Notice and Safety Code Violation Notification.

Elevator **Unit In compliance** **Number of Violations Corrected:** _____

Escalator

The periodic inspection revealed that the elevator unit is in compliance with the Safety Code recommendation that a certificate be issued by the Commissioner of Labor and Industry.

I affirm that the elevator unit identified above was inspected in conformance with the Safety Code as required by the Annotated Code of Maryland, Title 12 and Regulations adopted by the Commissioner of Labor and Industry.

Q.E.I. Signature _____ **Cert #:** _____

Print Name _____ **Phone #** _____ **Date** _____

Signature of Owner or Authorized Representative _____

Print Name _____ **Date** _____

Name of Testing Company: _____

