

Application for Permit to Alter/Repair an Elevator of Escalator

Oklahoma Department of Labor
 Safety Standards Division – Elevator Inspections
 409 NE 28th Street, 3rd Floor
 Oklahoma City, OK 73105
 (405) 521-6100

STATE SERIAL NUMBER

Alteration Repair Both

OFFICE USE ONLY	
PERMIT NUMBER	
PERMIT APPROVED BY	DATE

The Oklahoma Department of Labor will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

This form is issued under authority of 59 O.S. § 3020 et seq. You must complete this form and return it to the above address if you want to alter or do a major repair on an elevating device.

O.A.C. 3021 B.1. A person, firm or corporation shall not install, alter, or do a major repair on an elevator without first having obtained a permit from the department. A permit shall be issued only to a person, firm or corporation licensed by the director as an elevator contractor. Permit applications shall be made on forms furnished by the department.

380:70-11-8 An Altered, including major repairs, or relocated elevator shall not be placed into service until it has been inspected.

ELEVATOR LOCATION (BUILDING NAME)				COUNTY	
LOCATION (ADDRESS)			CITY		ZIP CODE
BILLING INFORMATION (OWNER OR DESIGNATED AGENT)			EMAIL		PHONE
BILLING ADDRESS		CITY		STATE	ZIP CODE
CONTRACTOR'S COMPANY NAME AND BRANCH OFFICE (CITY)				CONTRACTOR'S LICENSE NUMBER	
MANUFACTURED BY				MANUFACTURER'S SERIAL #	
TYPE OF ELEVATOR		MACHINE TYPE			VOLTAGE
PASSENGER ESCALATOR		TRACTION HYDRAULIC			_____ A.C. D.C.
FREIGHT OTHER _____		DRUM ROPED HYDRAULIC			
		OTHER _____			
CAPACITY _____ LBS	FLOORS TRAVELED	RISE _____ FT _____ IN	SPEED _____ FPM	NO. CAR ENTRANCES	NO. HOISTWAY ENTRANCES
LIST EACH SPECIFIC ALTERATION AS LISTED IN ASME A17.1 SECTION 8.7					
CONTRACTOR'S SIGNATURE			PRINT NAME		DATE
OFFICE USE ONLY					
INSPECTOR'S COMMENTS					
INSPECTOR'S SIGNATURE			INSPECTOR NUMBER		DATE