

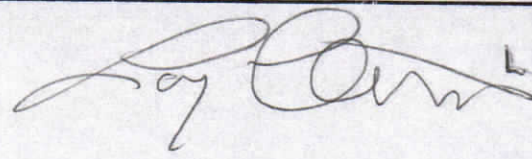
# INITIAL ELEVATOR INSPECTION

## LIST OF CODE VIOLATIONS

Elev# 2

Name of Owner: <u>Park Danforth</u>	Registration # <u>EL 37463</u>
Physical Location: <u>777 Stevens Ave Portland</u>	

- ✓ 1. Provide grill over vent top of Hoistway
- ✓ 2. Provide prop. <sup>Nearest striking</sup> point Top of Car (Handrail)
- ✓ 3. Mark Top of Car with Red + white under eye Bolt
- ✓ 4. Mark Pit Refuge under 2ft. w/ Red + white
- ✓ 5. Belt Sump cover to pit Floor
- ✓ 6. Complete Alarm sensor install in pit
- ✓ 7. Two way communication from MR to Car must not feedback
- ✓ 8. Provide Sign @ top of Hoistway "Danger Low Clearance"
- ✓ 9. " Pit "
- ✓ 10. Install AC-Heat unit in mech Room
- ✓ 11. Remove Smoke caps
- ✓ 12. Provide finished lobbies @ egress in each landing

 Lic mech Sign off

Deputy Inspector: [Signature] Lic #: 208 Date: 11/30/16  
Revised: 8/07



STATE OF MAINE  
 DEPARTMENT OF PROFESSIONAL  
 AND FINANCIAL REGULATION  
 OFFICE OF PROFESSIONAL & OCCUPATIONAL  
 REGULATION  
 ELEVATOR AND TRAMWAY SAFETY PROGRAM  
 35 STATE HOUSE STATION  
 AUGUSTA, MAINE  
 04333-0035

Paul R. Lepage  
 Governor

Anne L. Heald  
 Commissioner

**SPECIAL ELEVATOR CERTIFICATE**

Name of Owner:		Registration #	
Park Danforth		El-37463	
Physical Location:			
777 Stevens Ave Portland			
Capacity:	Speed:	Type:	
4000 lbs	150 FPM	Pass	
Issue Date:	Expiration Date:		
12/09/16	2/28/17		

Place this certificate in the Certificate holder. When the permanent Certificate of Operation arrives, replace this certificate with the Certificate of Operation.

Deputy Inspector:

Lic #:

FN5-16

To report an accident involving this elevator, call: 1-888-580-5754  
 To speak with Board Staff regarding this elevator, call: 207/624-8672

Revised: 01/16



# UNIFORM FINAL ACCEPTANCE

Front Line Order # 6344552 BRANCH NUMBER 160  
 Network # 70529427 FINAL ACCEPTANCE DATE 12-8-16  
 Equipment # 42548741 WARRANTY START DATE \_\_\_\_\_

TOTAL NUMBER OF MONTHS FREE SERVICE AND EXTENDED FREE SERVICE \_\_\_\_\_

PROJECT NAME Park Danforth LOCATION Portland ME 777 Stevens A  
 EQUIPMENT DESCRIPTION 1 Ecospace Elevator 6 landing  
Elevator B

The undersigned has examined the above referenced equipment and finds same satisfactory and in accordance with the Contract. We accept this referenced equipment under the terms and guarantees of said Contract.

By mutual agreement, it is understood that the legal time of lien rights will not commence until the service period, specified in the above-mentioned Contract, has been completed.

We acknowledge that KONE, Inc. will file a lien if payments are not made in accordance with Contract Terms.

\_\_\_\_\_  
 OWNER'S OR PURCHASER'S REPRESENTATIVE

\_\_\_\_\_  
 ARCHITECT

Andrew Pires  
 TYPE OR PRINT NAME

Operation and care instructions for referenced equipment have been given to:

By: \_\_\_\_\_

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Title

Elevator 1 Phone #: 207-317-5528  
 Elevator 2 Phone #:  
 Elevator 3 Phone #:  
 Elevator 4 Phone #:  
 Elevator 5 Phone #:  
 Elevator 6 Phone #:

Programmed to phone #:  
 Programmed to phone #:  
 Programmed to phone #:  
 Programmed to phone #:  
 Programmed to phone #:  
 Programmed to phone #:

Voice Link Monitoring Service Agreement: \_\_\_\_\_

\* If more space is required for additional elevator units, please include on separate sheet and attach to Final Acceptance.

MAINTENANCE MANUAL

OTHER