



**STATE OF WISCONSIN**  
 Department of Safety and Professional Services  
 1400 E Washington Ave.  
 Madison WI 53703

SAFETY AND BUILDINGS DIVISION  
 Inspection and Safety Support Section  
 P.O. Box 7302  
 Madison, WI 53707-7302  
 (608) 266-1818  
 www.commerce.wi.gov

**Governor Scott Walker**                      **Secretary Dave Ross**

**Category 1 Periodic Escalator Test**  
**ASME A17.1- Section 8.11.4.2**

**Instructions:** Please TYPE or PRINT CLEARLY the information requested on this form.  
 Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m)]

<b>Building Name</b>	<b>Owners Name</b>	<b>Registration Tag No.</b>
<b>Street Address</b>	<b>Address</b>	<b>Regulated Object ID.</b>
<b>City, State, Zip</b>	<b>City, State, Zip</b>	<b>Manufacturer</b>

Rated Speed: \_\_\_\_\_ fpm.                      Capacity: \_\_\_\_\_ lbs.                      Normal Direction of travel:  Up  Down

**1. ASME A17.1 8.11.4.2.19 Step/Skirt Performance Index:** The escalator skirt shall not be cleaned, lubricated, or otherwise modified in preparation for testing. The escalator instantaneous step/ skirt index measurements shall be recorded at intervals no larger than 150 mm (6 in.) from each side of two distinct steps along the inclined portion of the escalator, where the steps are fully extended. Test steps shall be separated by a minimum of 8 steps.

Step 1 Left:                      Right:                      Step 2 Left:                      Right:                      Skirt Deflectors: Yes  No

**2. ASME A17.1 8.11.4.2.20 Clearance Between Step and Skirt (Loaded Gap).** Loaded gap measurements shall be taken at intervals not exceeding 300 mm (12 in.) in transition region (6.1.3.6.5) and before the steps are fully extended. These measurements shall be made independently on each side of the escalator.

Top landing Left:                      Right:                      Bottom landing Left:                      Right:                      (Applies only to units contracted after 3/31/2004)

If any test did not prove satisfactory, please explain.

Comments:

**3. ASME A17.1 Requirement 8.11.1.6:** A metal test tag with the test date, the requirement number requiring the test, and the name of the person or firm performing the test shall be installed in each machine room.  
**Test shall be recorded in the Maintenance Record.**

<b>The Above Tests Were Performed In Compliance With ASME A17.1 and Comm. 18</b>			
Firm Performing Test	Address	City, State, Zip	Date of Test
Name and License Number of Person Performing Test (Print)		Signature of Person Performing Test	

**This Report Shall Be Filed With the Department of Safety & Professional Services Within 15 (Fifteen) Days of Completion of All Tests.**

**This Report Shall Be Filed Not Less Than Once Per Year**

**Copy Distribution: One copy to be retained by firm or person performing test**

**One copy to be sent to Safety And Buildings Division, P.O. Box 7302, Madison, WI 53707-7302**

**One copy to be retained by owner or tenant**