



# Periodic Escalator/Moving Walk Checklist

Department of Consumer and Business Services  
 Building Codes Division

1535 Edgewater St. NW, Salem, OR  
 Mailing address: P.O. Box 14470, Salem, OR 97309-0404  
 503-378-1298 • Fax: 503-378-4101  
 oregon.gov/bcd

Maintenance Company: \_\_\_\_\_

Site Name: \_\_\_\_\_

Current Year: \_\_\_\_\_

Equipment ID: \_\_\_\_\_

8.11.4.1 PERIODIC INSPECTION & TEST REQUIREMENTS			
N/A	(1 <sup>st</sup> ) JAN-JUN	(2 <sup>nd</sup> ) JUL-DEC	Description
<b>PERIODIC INSPECTION AND TESTS SHALL INCLUDE THE FOLLOWING</b>			
<input type="checkbox"/>			(a) General fire protection (Items 7.1 and 9.1)
<input type="checkbox"/>			(b) Geometry (Items 7.2 and 9.2)
<input type="checkbox"/>			(c) Handrails (Items 7.3 and 9.3)
<input type="checkbox"/>			(d) Entrance and egress (Items 7.4 and 9.4)
<input type="checkbox"/>			(e) Lighting (Items 7.5 and 9.5)
<input type="checkbox"/>			(f) Caution signs (Items 7.6 and 9.6)
<input type="checkbox"/>			(g) Combplate (Items 7.7 and 9.7)
<input type="checkbox"/>			(h) Deck barricade guard and antislid devices (Items 7.8 and 9.8)
<input type="checkbox"/>			(i) Steps and treadway (Items 7.9 and 9.9)
<input type="checkbox"/>			(j) Operating devices (Items 7.10 and 9.10)
<input type="checkbox"/>			(k) Skirt obstruction device (Item 7.11)
<input type="checkbox"/>			(l) Handrail entry device (Items 8.13 and 10.13)
<input type="checkbox"/>			(m) Egress restriction device (Item 7.13 and 9.13)
<input type="checkbox"/>			(n) Speed (Items 7.14 and 9.14)
<input type="checkbox"/>			(o) Balustrades (Items 7.15 and 9.15)
<input type="checkbox"/>			(p) Ceiling intersection guards (Items 7.16 and 9.16)
<input type="checkbox"/>			(q) Skirt panels (Items 7.17 and 9.17)
<input type="checkbox"/>			(r) Outdoor protection (Items 7.18 and 9.18)
<input type="checkbox"/>			(s) Machinery space access, lighting, receptacle, and condition (Items 2.1 and 4.1)
<input type="checkbox"/>			(t) Additional stop switch(es) (Items 2.2 and 4.2)
<input type="checkbox"/>			(u) Controller and wiring (Items 2.3 and 4.3)
<input type="checkbox"/>			(v) Code data plate(2.23.2) (Items 8.14 and 10.14)

8.6.8.3.3 STEP SKIRT INDEX MEASUREMENT	
<input type="checkbox"/>	(a) less than or equal to 0.15
<input type="checkbox"/>	(b) less than or equal to 0.25 (ASME A17.1a-2002 and later with skirt deflector)
<input type="checkbox"/>	(c) less than or equal to 0.40 (ASME A17.1-2000 and earlier with skirt deflector)
Test Date (MM/YY): _____ Index Result: _____	

**8.11.4 INSPECTION TEST PERIODS**  
 The routine inspection and tests of escalators and moving walks shall be made at intervals no greater than six months. All references to "Item" are to ASME A17.2-2010 Guide for Inspection of Elevators, Escalators and Moving Walks.

8.11.2.1.2 INSPECTIONS MADE IN MACHINE ROOM/SPACE			
N/A	DATE TESTED	ASME-2010	Description
<input type="checkbox"/>		8.6.8.15.1	Machine space (Items 8.1 and 10.1)
<input type="checkbox"/>		8.6.8.15.2	Stop switch (Items 8.2 and 10.2)
<input type="checkbox"/>		8.6.8.15.3	Controller and wiring (Items 8.3 and 10.3)
<input type="checkbox"/>		8.6.8.15.4	Drive machine and brake (Items 8.4 and 10.4)
<input type="checkbox"/>		8.6.8.15.5	Speed governor (Items 8.5 and 10.5)
<input type="checkbox"/>		8.6.8.15.6	Broken drive chain device (Items 8.6 and 10.6)
<input type="checkbox"/>		8.6.8.15.7	Reversal stop switch (Items 8.7 and 10.7)
<input type="checkbox"/>		8.6.8.15.8	Broken step chain or treadway device (Items 8.8 and 10.8)
<input type="checkbox"/>		8.6.8.15.9	Step up thrust device (Items 7.9 and 8.9)
<input type="checkbox"/>		8.6.8.15.10	Missing step or pallet device (Items 8.10 and 10.10)
<input type="checkbox"/>		8.6.8.15.11	Step and pallet level device (Items 8.11 and 10.11)
<input type="checkbox"/>		8.6.8.15.12	Steps, pallet, step or pallet chain, and trusses (Items 8.12 and 10.12)
<input type="checkbox"/>		8.6.8.15.13	Handrail safety systems (Items 8.13 and 10.13)
<input type="checkbox"/>		8.6.8.15.14	Heaters (Items 8.3 and 10.3)
<input type="checkbox"/>		8.6.8.15.15	Permissible stretch in escalator chains (Item 7.9)
<input type="checkbox"/>		8.6.8.15.16	Disconnected motor safety device (Item 8.6 and 10.6)
<input type="checkbox"/>		8.6.8.15.17	Response to smoke detectors (Items 8.15 and 10.15)
<input type="checkbox"/>		8.6.8.15.18	Comb-step or comb-pallet impact device (Items 7.7.2 and 9.7.2)
<input type="checkbox"/>		8.6.8.15.19	Step/skirt performance index check (Item 7.17)
<input type="checkbox"/>		8.6.8.15.20	Clearance between step and skirt (loaded gap) (Item 7.17)
<input type="checkbox"/>		8.6.8.15.21	Control devices conformance (6.1.6.2.2 or 6.2.6.2.2)
<input type="checkbox"/>		8.6.8.15.22	Step lateral displacement device (6.1.6.3.14)
<input type="checkbox"/>		8.6.8.15.23	Seismic switch (Items 7.20.2 and 9.20.2)
<input type="checkbox"/>		8.6.8.13	Period cleaning - REQUIRED ONCE EVERY 2 YEARS <i>Last cleaning date (MM/DD/YY):</i>

6.1.3.6.4 SAFETY ZONE	
**The entry and exit zone shall be kept clear of all obstacles**	
_____ inches - DISTANCE BETWEEN CENTERLINE OF HANDRAILS	
+ 8 inches equals minimum safety WIDTH: _____ inches	
x2 equals minimum safety LENGTH: _____ inches	
Safety Zone Meets Compliance? Y/N: _____	
Initials: _____	Date: _____

(SEE REVERSE SIDE FOR GENERAL INSTRUCTIONS)



## General instructions:

This checklist reflects the **minimum routine** maintenance and testing standards that apply to your **escalator or moving walk**.

Not all of the items that appear on this checklist will be applicable to your equipment. A licensed elevator contractor is capable of assisting you in determining those items that pertain to your equipment. **Check the “N/A” box for all items that do not apply.**

Item numbers (e.g. Item 1.1, 2.12, etc.) found in the description column refer to **ASME A17.2, Guide for Inspection of Elevators, Escalators and Moving Walks**. This guide provides information on how to perform routine maintenance checks and periodic tests. (Available through the Tech Bookstore; 800-ASK-BOOK)

The checklist is to be kept in the respective elevator machine room in clear view and kept up-to-date. You will need one checklist for each escalator/moving walk per year.

### Who should perform elevator maintenance and testing?

Only properly licensed elevator personnel or owner-authorized personnel are allowed to perform maintenance and tests on elevator equipment.

Please refer to the shaded items in the description column on the checklist. The shaded items may be performed by persons authorized by the building owner. **The items not shaded can only be performed by licensed elevator personnel.**

Any owner-authorized person performing maintenance or testing must know how to perform the maintenance evaluation or test and be capable of recognizing incorrect elevator standards or operation. Corrections in operation or other repairs must be performed by licensed elevator personnel employed by a licensed elevator contractor.

### Filling out the checklist

The owner is responsible for ensuring the checklist is kept current. The person or firm performing the required items must be indicated on the checklist. Where there is insufficient room to enter all information on the checklist, a separate sheet or log book may be used.

The log book entry should clearly reference the checklist item number found after each maintenance and test description entry. In all cases, the date (*mm/dd or mm/yyyy as applicable*) must be entered on the checklist.

The checkbox  following the item description is to be checked only if the task was performed by owner-authorized personnel. Leave the box unchecked if the item was performed by licensed elevator personnel.

### Example: Routine Checklist Entries

N/A	(1 <sup>st</sup> ) JAN-JUN	(2 <sup>nd</sup> ) JUL-DEC		Description	
<input type="checkbox"/>	<b>4/25</b>	<b>10/15</b>	(a)	Door reopening device (Item 1.1)	<input type="checkbox"/>
<input type="checkbox"/>	<b>4/17</b>	<b>10/12</b>	(f)	Car emergency signal (Item 1.6)	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<b>4/25</b> <b>26 lbs</b>	<b>10/15</b> <b>26 lbs</b>	(h)	Door closing force (Item 1.8)	

When measurements are required, they should be entered in the date box associated with the item. For example, the pressure relief reading should be entered as noted in the following example:

### Example: Checklist Entry & Measurements

N/A	DUE DATE	DATE TESTED	ASME-2010	Description
<input type="checkbox"/>	<b>11/2019</b>	<b>10/2019</b> <b>550 psi</b>	8.6.5.14.1	Relief valve setting and system pressure test

### Additional recordkeeping

The owner is also required to provide a means to document trouble calls and other information that pertain to the operational history of the elevator. The documentation must also describe abnormalities that were discovered or occurred during routine maintenance checks and tests and what was done to correct the abnormalities.

This log should be kept on site and preferably in the elevator machine room. There is currently no particular format for keeping this information.

New checklists will be available online at [www.bcd.oregon.gov](http://www.bcd.oregon.gov) or may be obtained from this office by calling (503) 373-1298.