

HYDROELITE SURVEY SHEET

SITE ADDRESS

	LIFT NUMBER	
	INSTALLER OF LIFT	
	ENGINEERS NAME	
	CUSTOMERS NAME	
	DATE	

GENERAL

1) IS THE LIFT SWITCHED ON AND WORKING AT THE TIME OF THE SURVEY		<input type="checkbox"/> NO	<input type="checkbox"/> YES	
2 a) MOTOR ROOM LOCATION	BOTTOM ADJACENT	<input type="checkbox"/>	TOP ADJACENT	<input type="checkbox"/>
	BOTTOM REMOTE	<input type="checkbox"/>	TOP REMOTE	<input type="checkbox"/>
	OTHER	<input type="checkbox"/>	TOP ABOVE	<input type="checkbox"/>
b) MOTOR ROOM ACCESS	GOOD	<input type="checkbox"/>	AVERAGE	<input type="checkbox"/>
	POOR	<input type="checkbox"/>	OTHER	<input type="checkbox"/>
c) INCOMING SUPPLY	3 WIRE NO NEUTRAL	<input type="checkbox"/>	4 WIRE NEUTRAL	<input type="checkbox"/>
	EARTH WIRE	<input type="checkbox"/>		
d) EXISTING CONTROLLER	WALL MOUNTED	<input type="checkbox"/>	FLOOR MOUNTED	<input type="checkbox"/>
	TANK MOUNTED	<input type="checkbox"/>		
e) CONTROLLER TYPE	APB	<input type="checkbox"/>	DOWN COLLECTIVE	<input type="checkbox"/>
	FULL COLLECTIVE	<input type="checkbox"/>	UP COLLECTIVE	<input type="checkbox"/>
f) NO. OF LIFTS			g) NO. OF FLOORS	
k) CAR LOAD (PERSONS)			l) CAR LOAD (KG)	
o) EST CAR WEIGHT (kg)			n) LIFT SPEED UP	
m) LIFT SPEED DOWN				
3 a) DISTANCE FROM TOP OF LIFT SHAFT TO NEW CONTROLLER LOCATION			METER'S	
b) DISTANCE FROM PIT AREA TO NEW CONTROLLER			METER'S	
c) LIFT TRAVEL			METER'S	
d) HEAD ROOM			METER'S	
e) PIT DEPTH			METER'S	

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MOTOR ROOM

4 a) MOTOR SIZE (kw)	<input style="width: 90%;" type="text"/>	b) PUMP FLOW	<input style="width: 90%;" type="text"/>
c) STATIC PRESSURE (bar)	<input style="width: 90%;" type="text"/>	d) TANK SIZE(LITRES)	<input style="width: 90%;" type="text"/>
e) SOLENOID VOLTAGE	<input style="width: 90%;" type="text"/>	f) VALVE SIZE	<input style="width: 90%;" type="text"/>
g) HOSE LENGTH (meters)	<input style="width: 90%;" type="text"/>	h) HOSE DIAMETER	<input style="width: 90%;" type="text"/>
i) ISOLATOR SIZE (amps)	<input style="width: 90%;" type="text"/>	j) NO. OF SOLENOIDS	<input style="width: 90%;" type="text"/>
k)	<input style="width: 90%;" type="text"/>	l)	<input style="width: 90%;" type="text"/>
q) VALVE MAKE	<input style="width: 100%;" type="text"/>		p) <input style="width: 90%;" type="text"/>
r) PRESSURE SWITCHES HIGH <input type="checkbox"/> YES <input type="checkbox"/> NO LOW <input type="checkbox"/> YES <input type="checkbox"/> NO OVERLOAD <input type="checkbox"/> YES <input type="checkbox"/> NO			
5) ARE THERE THE FOLLOWING IN THE MOTOR ROOM			
1) is there an oil cooler fitted	<input type="checkbox"/> yes <input type="checkbox"/> no	2) motor door lock	<input type="checkbox"/> yes <input type="checkbox"/> no
3) is the oil cooler in good order	<input type="checkbox"/> yes <input type="checkbox"/> no	4) is there fire recall	<input type="checkbox"/> yes <input type="checkbox"/> no
5) is the main hose in good condition	<input type="checkbox"/> yes <input type="checkbox"/> no	6) socket outlet in the m/room	<input type="checkbox"/> yes <input type="checkbox"/> no
7) is there an elec shock notice	<input type="checkbox"/> yes <input type="checkbox"/> no	8) bung tank	<input type="checkbox"/> yes <input type="checkbox"/> no
9) emergency door release key	<input type="checkbox"/> yes <input type="checkbox"/> no	10) motor room door notice	<input type="checkbox"/> yes <input type="checkbox"/> no
11) is the main switch lockable	<input type="checkbox"/> yes <input type="checkbox"/> no	12) copy of electrical drawing	<input type="checkbox"/> yes <input type="checkbox"/> no
13) does motor room need painting	<input type="checkbox"/> yes <input type="checkbox"/> no	14) are all switch's labeled	<input type="checkbox"/> yes <input type="checkbox"/> no
15) ventilation in the motor room	<input type="checkbox"/> yes <input type="checkbox"/> no	16) emergency light	<input type="checkbox"/> yes <input type="checkbox"/> no
17) m/room light need upgrading	<input type="checkbox"/> yes <input type="checkbox"/> no	18) oil level ind	<input type="checkbox"/> yes <input type="checkbox"/> no

COMMENT / RECOMMENDATION BOX

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DOORS

6 a) ARE THERE MANUAL GATE'S <input type="checkbox"/> yes <input type="checkbox"/> no		b) POWER DOOR'S <input type="checkbox"/> yes <input type="checkbox"/> no	
c) NO. OF CAR DOORS	FRONT	<input style="width: 50px;" type="text"/>	REAR <input style="width: 50px;" type="text"/>
d) LANDING DOOR FRONT	BASEMENT	<input type="checkbox"/>	LOWER GROUND <input type="checkbox"/>
	GROUND	<input type="checkbox"/>	FIRST <input type="checkbox"/>
	SECOND	<input type="checkbox"/>	THIRD <input type="checkbox"/>
	FOURTH	<input type="checkbox"/>	FIFTH <input type="checkbox"/>
	SIXTH	<input type="checkbox"/>	SEVENTH <input type="checkbox"/>
e) LANDING DOOR REAR	BASEMENT	<input type="checkbox"/>	LOWER GROUND <input type="checkbox"/>
	GROUND	<input type="checkbox"/>	FIRST <input type="checkbox"/>
	SECOND	<input type="checkbox"/>	THIRD <input type="checkbox"/>
	FOURTH	<input type="checkbox"/>	FIFTH <input type="checkbox"/>
	SIXTH	<input type="checkbox"/>	SEVENTH <input type="checkbox"/>
f) OTHER DOOR DESIGNATIONS	<input style="width: 100%; height: 20px;" type="text"/>		
g) DOOR OPEN LIMIT	<input type="checkbox"/> yes <input type="checkbox"/> no	h) DOOR CLOSE LIMIT	<input type="checkbox"/> yes <input type="checkbox"/> no
i) SLOW OPEN LIMIT	<input type="checkbox"/> yes <input type="checkbox"/> no	j) SLOW CLOSE LIMIT	<input type="checkbox"/> yes <input type="checkbox"/> no
k) DOOR MOTOR BRAKE	<input type="checkbox"/> yes <input type="checkbox"/> no	l) PRESSURE SWITCH	<input type="checkbox"/> yes <input type="checkbox"/> no
m) PHOTO CELL	<input type="checkbox"/> yes <input type="checkbox"/> no	n) MEMCO/PANO 40 EDGE	<input type="checkbox"/> yes <input type="checkbox"/> no
o) RETIRING RAMP	<input type="checkbox"/> yes <input type="checkbox"/> no	p) GATE OPEN BELL	<input type="checkbox"/> yes <input type="checkbox"/> no
q) DOOR OPERATOR TYPE	<input style="width: 150px;" type="text"/>	r) VOLTAGE AC/DC	<input style="width: 50px;" type="text"/>
s) MANUAL GATE LOCK TYPE	<input style="width: 150px;" type="text"/>	t) RETIRING RAMP VOLTAGE	<input style="width: 50px;" type="text"/>
u) DOOR MOTOR RESISTORS	<input type="checkbox"/> yes <input type="checkbox"/> no	LOCATION	<input style="width: 100px;" type="text"/>

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LIFT CAR, CYLINDER'S AND PRV

7 a) C.O.P DESIGNATIONS	<input type="checkbox"/> B	<input type="checkbox"/> LG	<input type="checkbox"/> G	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
b) OTHER DESIGNATIONS	<input style="width: 100%;" type="text"/>					
c) DOOR OPEN BUTTON	<input type="checkbox"/> yes	<input type="checkbox"/> no	d) DOOR CLOSE BUTTON	<input type="checkbox"/> yes	<input type="checkbox"/> no	
e) GOODS KEY SWITCH	<input type="checkbox"/> yes	<input type="checkbox"/> no	f) CAR LIGHT SWITCH	<input type="checkbox"/> yes	<input type="checkbox"/> no	
g) DOOR HOLD SWITCH	<input type="checkbox"/> yes	<input type="checkbox"/> no	h) OTHER SWITCH	<input type="checkbox"/> yes	<input type="checkbox"/> no	
i) CAR INDICATOR	<input type="checkbox"/> yes	<input type="checkbox"/> no	j) EMERGENCY LIGHT	<input type="checkbox"/> yes	<input type="checkbox"/> no	
k) ARROWS	<input type="checkbox"/> yes	<input type="checkbox"/> no	l) VOICE ANNOUNCER	<input type="checkbox"/> yes	<input type="checkbox"/> no	
m) PAWL DEVICE'S	<input type="checkbox"/> yes	<input type="checkbox"/> no	n) TRAP DOOR SWITCH	<input type="checkbox"/> yes	<input type="checkbox"/> no	
	DIGITAL	LCD	BULB	OTHER	MAKE	VOLTAGE
o) CAR INDICATOR TYPE	<input type="checkbox"/> N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
p) LANDING INDICATOR TYPE	<input type="checkbox"/> N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
q) INDICATOR LOCATION	<input type="checkbox"/> N/A	<input type="checkbox"/> CAR	<input type="checkbox"/> B	<input type="checkbox"/> LG	<input type="checkbox"/> G	<input type="checkbox"/> 1
		<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
r) ARROW'S LOCATION	<input type="checkbox"/> N/A	<input type="checkbox"/> CAR	<input type="checkbox"/> B	<input type="checkbox"/> LG	<input type="checkbox"/> G	<input type="checkbox"/> 1
		<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
s) ARRANGEMENT	<input style="width: 100%;" type="text"/>		t) NO. OF CYLINDER'S	<input style="width: 100%;" type="text"/>		
u) CYLINDER MAKE	<input style="width: 100%;" type="text"/>		v) CYLINDER DIAMETER	<input style="width: 100%;" type="text"/>		
w) TRUNKING TYPE	<input style="width: 100%;" type="text"/>		x) TRUNKING SIZE	<input style="width: 100%;" type="text"/>		
y) PRV TYPE	<input style="width: 100%;" type="text"/>		z) NO. OF PRV'S	<input style="width: 100%;" type="text"/>		

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LANDING PUSHES AND GENERAL

8 a) NO. OF BUTTONS IN PUSH PLATE		<input type="checkbox"/> one	<input type="checkbox"/> two
b) CALL & SEND	<input type="checkbox"/> yes <input type="checkbox"/> no	c) LIFT COMING	<input type="checkbox"/> yes <input type="checkbox"/> no
d) LIFT IN USE	<input type="checkbox"/> yes <input type="checkbox"/> no	e) LIFT HERE	<input type="checkbox"/> yes <input type="checkbox"/> no
f) CALL ACCEPTANCE	<input type="checkbox"/> yes <input type="checkbox"/> no	g) LAMP VOLTAGE	<input style="width: 80px;" type="text"/>
h) KEY SWITCH	<input type="checkbox"/> yes <input type="checkbox"/> no	FUNCTION	<input style="width: 150px;" type="text"/> LOCATION <input style="width: 80px;" type="text"/>
i) SHUT DOWN SWITCH	<input type="checkbox"/> yes <input type="checkbox"/> no	FUNCTION	<input style="width: 150px;" type="text"/> LOCATION <input style="width: 80px;" type="text"/>
j) LOCK OFF SWITCH	<input type="checkbox"/> yes <input type="checkbox"/> no	FUNCTION	<input style="width: 150px;" type="text"/> LOCATION <input style="width: 80px;" type="text"/>
k) FIREMAN SWITCH	<input type="checkbox"/> yes <input type="checkbox"/> no		LOCATION <input style="width: 80px;" type="text"/>

9) ARE THERE THE FOLLOWING			
1) SLACK ROPE SWITCHES	<input type="checkbox"/> yes <input type="checkbox"/> no	2) BUFFER SWITCHES	<input type="checkbox"/> yes <input type="checkbox"/> no
3) OVERSPEED GOVERNOR	<input type="checkbox"/> yes <input type="checkbox"/> no	4) TENSION WEIGHT	<input type="checkbox"/> yes <input type="checkbox"/> no
5) DOOR CLOSURER'S	<input type="checkbox"/> yes <input type="checkbox"/> no	6) RAM SEAL LEAKING	<input type="checkbox"/> yes <input type="checkbox"/> no
7) SAFETY GEAR SWITCH	<input type="checkbox"/> yes <input type="checkbox"/> no	8) PIT STOP SWITCH	<input type="checkbox"/> yes <input type="checkbox"/> no
9) SHAFT LIGHTING	<input type="checkbox"/> yes <input type="checkbox"/> no	10) DEEP PIT NOTICE	<input type="checkbox"/> yes <input type="checkbox"/> no
11) PIT LADDER FLAT TREADS	<input type="checkbox"/> yes <input type="checkbox"/> no	12) REDUCED PIT NOTICE	<input type="checkbox"/> yes <input type="checkbox"/> no
13) DRAIN LINE AND BOTTLE	<input type="checkbox"/> yes <input type="checkbox"/> no	14) WHEELS GUARDED	<input type="checkbox"/> yes <input type="checkbox"/> no
15) ALL WHEELS PAINTED YELLOW	<input type="checkbox"/> yes <input type="checkbox"/> no	16) SOCKET OUTLET PIT	<input type="checkbox"/> yes <input type="checkbox"/> no
17) REDUCED HEAD ROOM NOTICE	<input type="checkbox"/> yes <input type="checkbox"/> no	18) PIT PROP	<input type="checkbox"/> yes <input type="checkbox"/> no
19) SPLIT PIN'S IN ROPE ENDS	<input type="checkbox"/> yes <input type="checkbox"/> no	20) BARRIER ON CAR TOP	<input type="checkbox"/> yes <input type="checkbox"/> no
21) LANDING TOE GUARDS	<input type="checkbox"/> yes <input type="checkbox"/> no	22) LIFTING BEAM	<input type="checkbox"/> yes <input type="checkbox"/> no
23) EMERGENCY LIGHT IN LIFT CAR	<input type="checkbox"/> yes <input type="checkbox"/> no	24) LIFTING BEAM TESTED	<input type="checkbox"/> yes <input type="checkbox"/> no
25) ALL DOOR RELEASE WORKING	<input type="checkbox"/> yes <input type="checkbox"/> no	26) LOAD PLATE IN THE LIF	<input type="checkbox"/> yes <input type="checkbox"/> no
27) ELEC SWITCH ON THE O.S.G	<input type="checkbox"/> yes <input type="checkbox"/> no	28) CAR TOE GUARD	<input type="checkbox"/> yes <input type="checkbox"/> no
29) TELEPHONE IN THE LIFT	<input type="checkbox"/> yes <input type="checkbox"/> no	30) SHAFT FACIAS	<input type="checkbox"/> yes <input type="checkbox"/> no

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