



Commonwealth of Kentucky
Public Protection Cabinet
Department of Housing, Buildings and Construction
Division of Building Code Enforcement
Elevator Section
500 Mero St, 1st Floor
Frankfort, Kentucky 40601
Telephone: 502-573-1694 Fax: 502-573-1059



ELEVATOR CONSTRUCTION & INSTALLATION PERMIT APPLICATION

Application is hereby made to the Elevator Section within the Division of Building Codes Enforcement for one unit as identified below:

ASME A17.1

- Electric Elevator: Freight Passenger Hydraulic Elevator: Freight Passenger
- Screw Column Elevator Sidewalk Elevator Hand Elevator
- Rack & Pinion Elevator Inclined Elevator Special Purpose Personnel
- Escalator LULA Dumbwaiter (power)
- Material Lift with Transfer Device
- Private Residential Elevator
- Private Residential Lift: Inclined Platform Lift Inclined Wheelchair Lift Stairway Lift Vertical Wheelchair Lift
- Non-Private Residential Lift: Inclined Platform Lift Inclined Wheelchair Lift Stairway Lift Vertical Wheelchair Lift

ASME B20.1

- Vertical Reciprocating Conveyor

Speed (per minute):	fpm	Capacity:	lbs	Feet Unit Travels:	ft
Unit is State Owned:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Floors Unit Travels:		Number of Horsepower of Motor:	
Manufacturer:		Number of Openings:	_____ Front _____ Rear		
Is this permit for construction use only? (Unit is not used for the public use) <input type="checkbox"/> Yes <input type="checkbox"/> No					

DRIVE OR SUSPENSION MEANS

- Traction Roped Hydraulic Rack & Pinion
- Direct-Plunge Hydraulic Geared Rope-Sprocket
- Winding Drum Level Hydraulic Coupling
- Chain & Sprocket Screw Column Other _____

<u>Location of Unit:</u> Name: Address: Email: Phone Number:	<u>Name of Owner if different from location name</u> Name: Address: Email: Phone Number:
<u>Elevator Co.</u> Name: Address: Email: Phone Number:	Application Fee: \$ Additional Notes:
Certificate #: Invoice #:	Date of Approval HBC Approval Signature