

PHONE: 540-987-3111  Lifting and Lowering Devices Inspection Form <b>FORM #501</b>	<b>Central Elevator Inspection Services II, LLC</b> P.O. Box 102 Boston VA 22713 www.central-elevator.com	FAX: 888-391-9437  <b>EV # 000</b> <u>3578</u>
Company Name: American Public University		Contact Person: Mel Dilley
Mailing Address: 111 W Congress St		Telephone: (304) 855-5299
City: Charles Town	State: WV	Zip: 25414
County: Jefferson		
Maintenance Company Name: TK Elevator		
<i>At the time of inspection the following conditions were observed.          Repairs shall be made per West Virginia Code §21-3C</i>		
<b>Device Information</b>		
Serial No#: 20329093		<b>Type of test performed today:</b>
Location Name: 393 N Lawrence St		<input type="checkbox"/> <b>5 Year Full Load</b>
Type: Passenger Traction		<input checked="" type="checkbox"/> <b>Annual No Load Test</b>
Make: Kone		<input type="checkbox"/> <b>Annual Pressure Test</b>
Capacity: <u>4000</u> Landings: <u>4</u>		
Installed: 2012 Modified:		<input checked="" type="checkbox"/> 01 Compliant <input type="checkbox"/> 02 Repairs Ordered <input type="checkbox"/> 03 Rejected
<u>A.18.1</u>	<u>A.17.1</u>	<u>A.17.2</u>
<i>All Non-Compliant Check Marks Are To Be Explained Below</i>		
Applicable Code Reference		
No violations as of this date		

**Additional Comments:**  
 FULL LOADS DUE 2027

**If Rejected:**

PER WEST VIRGINIA CODE §42-21-6.3 YOU HAVE 20 DAYS TO APPEAL THIS REPORT

SIGNATURE OF PERSON RECEIVING FORM: Signature unavailable DATE: 01/25/24  
 INSPECTOR'S SIGNATURE: Rob Thornhill WV NUMBER: 77 DATE: 01/25/24

04/26/16 update

<b>Registration Number:</b> <b>EV000</b> 3578	<b>ELEVATOR SAFETY SECTION</b> <b>WEST VIRGINIA DIVISION OF LABOR</b> <b>STATE CAPITOL COMPLEX</b> <b>BUILDING 6, ROOM 749-B</b> <b>CHARLESTON, WEST VIRGINIA 25305</b>	<b>QEI Inspector</b> <b>WV Number:</b> E104/ WV77		
<b>Safety Tests Report</b> <i>After completing this form on site, please forward it to the above listed address.</i> <i>All tests are to be performed in accordance with the requirements of the ASME safety code for</i> <i>for Elevators, Dumbwaiters, Escalators, and Platform Lifts (A17.1,A17.2,A18.1 current adopted code.)</i>				
<b>Site Data</b>	Site Name American Public University		Date of Test 01/25/2024	
	Site Street Address 393 N Lawrence St		Site County Jefferson	Site Telephone No. 304-885-5299
	Site City Charles Town		Zip Code 25414	<b>Installer / Manufacturer</b> Kone
<b>General Data</b>	<input checked="" type="checkbox"/> Pass. <input type="checkbox"/> Frght. <input type="checkbox"/> Escalator <input type="checkbox"/> DW. <input type="checkbox"/> Other		<b>Emergency Standby Power Tested</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	
	<b>Unit Serial Number</b> 20329093		<b>Fireman Service Tested ?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
	<b>Rated Capacity</b> 4000 Lbs.		<b>Type of Rails</b> <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Wood	
	<b>Type of Mechanism</b> <input checked="" type="checkbox"/> Traction <input type="checkbox"/> Bsmt. Drum <input type="checkbox"/> Hyd. Roped <input type="checkbox"/> Ceiling Drum <input type="checkbox"/> Hyd. Plunger <input type="checkbox"/> Screw <input type="checkbox"/> Ovh. Drum <input type="checkbox"/> Rack & Pinion <input type="checkbox"/> Other _____		<b>Type of Test</b> <input type="checkbox"/> 5Yr. Full Load <input checked="" type="checkbox"/> Annual Gov. <input type="checkbox"/> Relief Valve <input type="checkbox"/> Oil Buffers <input type="checkbox"/> Replace Gov. <input type="checkbox"/> Ct Wgt Safeties <input checked="" type="checkbox"/> Car Safeties <input type="checkbox"/> Other--	
	<b>Car Run By</b> Top   Bottom Ft.   Ft. In.   In.			
	<b>Safety Tested With --</b> Lbs. Load		<b>Safety Tested At --</b> 199 F.P.M.	
<b>Traction Unit</b>	<b>Rated Speed</b> 150 F.P.M. <input type="checkbox"/> 125 % <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		<b>Gov Sealed</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	<b>Actual Gov. Trip Speed</b> Car   F.P.M. <input checked="" type="checkbox"/> Centrifugal CWT   F.P.M. <input type="checkbox"/> Flyball		<b>Type of Governor</b> <input type="checkbox"/> Rack & Pinion <input type="checkbox"/> None	
	<b>Overspeed Switch Tripping Speed</b> Car   F.P.M. CWT   F.P.M.		<b>Gov. Seal Numbers</b> Factory sealed	
	<b>Type of Safety</b> <input type="checkbox"/> Inst. Roll <input checked="" type="checkbox"/> Flex Guide Clamp <input type="checkbox"/> Broken Rope <input type="checkbox"/> Wedge Clamp <input type="checkbox"/> Other _____ <input type="checkbox"/> Drum Operated <input type="checkbox"/> N / A <input type="checkbox"/> Rack & Pinion		<b>Remaining Turns On Drum</b> <input checked="" type="checkbox"/> N / A	
	<b>Slack Cable Switch</b> <input type="checkbox"/> On Car <input checked="" type="checkbox"/> N / A <input type="checkbox"/> On Machine		<b>Gov. Jaw Pull Through</b> Lbs.	
	<b>Type Car Buffer</b> <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Other <input checked="" type="checkbox"/> Spring <input type="checkbox"/> N / A		<b>Release Carrier Pullout</b> Lbs.	
<b>Hydro.</b>	<b>Empty Pressure</b> Psi.		<b>Working Pressure</b> Psi.	
	<b>Static Pressure</b> Psi.		<b>Relief Valve Opened At --</b> Psi.	
	<b>Pist. Dia</b> Inches			
	<b>15 Min. StandTest</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Working Press. Posted?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>ESC.</b>	<b>Rated Speed</b> F.P.M.		<b>The Relief Valve Was Tested By ---</b> <input type="checkbox"/> Engaging The Stop Ring <input type="checkbox"/> Using Shutoff Valve	
	<b>Was there any change in car position which cannot be accounted for by visible leakage or temperature change?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
	<b>Safety Devices Tested</b> <input type="checkbox"/> Broken Step / Chain Device <input type="checkbox"/> Stop Switch <input type="checkbox"/> Drive Chain / Tread. Device <input type="checkbox"/> Skirt Obstruct. Switch <input type="checkbox"/> Governor (If provided ) <input type="checkbox"/> Step Level <input type="checkbox"/> Step/Skirt Performance Index <input type="checkbox"/> Handrail Safety/Speed Monitoring		<input type="checkbox"/> Reversal Stop Device <input type="checkbox"/> Step Up Thrust Device <input type="checkbox"/> Comb.Step Impact <input type="checkbox"/> Other Devices	
	<b>Torque of Brake</b> Ft. Lbs.		<b>Number of Exposed Steps</b> _____	
		<b>Number of Comb Plate Teeth Missing</b> Top Land   Bottom Land		
<b>I certify that the above test (s) have been performed in accordance with the ASME codes and all applicable seals and tags are in there proper place.</b>				
<b>Name of Elevator Company</b> TK Elevator			<b>Mechanic's Name</b> Mike Jaskiewicz	
<b>Mechanic's Signature</b>			Please Print <b>Mechanic's License#</b> M688	
<b>Signature of Witnessing Inspector</b>			<b>WV#</b> 77 <b>Date</b> 01/25/2024	
FORM #100 Revised Date: 6/1/11				

# CHECKLIST FOR INSPECTION OF ELECTRIC ELEVATORS

## GENERAL NOTES:

(a) See ASME A17.2-2014 for detailed Code requirements.

(b) OK = Meets requirements; NG = Insert number to identify comment on back of this Checklist; NA = Not applicable.

EV#: 3578  
Serial#: 20329093  
Address: American Public University  
393 N Lawrence St  
Charles Town, WV

☒ Passenger  
☐ Freight Class \_\_\_\_\_

Rated Load: 4000  
Speed: 150

- ☐ Routine inspection and test  
☒ Periodic inspection and test  
☐ Acceptance inspection and test

Code Edition: A17.1 and A17.2

Inspected By: Rob Thornhill

Signature: Rob Thornhill Date: 01/25/2024  
QEI No: E104 Certifying Organization: QEITF

	OK	NG	NA		OK	NG	NA
<b>1 INSIDE OF CAR</b>							
1.1 Door Reopening Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.20 Winding Drum Machine and Slack Rope Device, Stop Motion Switch and Rope Fastening	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 Stop Switches	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.21 Belt or Chain Drive Machine	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.3 Operating Control Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.22 Motor Generator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.4 Car Floor and Landing Sill	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.23 Absorption of Regenerated Power	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.5 Car Lighting and Receptacles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.24 AC Drive from a DC Source	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.6 Car Emergency Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.25 Traction Sheaves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.7 Car Door or Gate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.26 Secondary and Deflector Sheaves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.8 Door Closing Force	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.27 Rope Fastenings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.9 Power Closing of Doors or Gates	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.28 Terminal Stopping Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.10 Power Opening of Doors or Gates	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.29 Car and Counterweight Safeties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.11 Car Vision Panels and Glass Car Doors	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2.40 Maintenance Records	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.12 Car Enclosure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.42 Rope Retainers or Restraints for Seismic Risk Zones, Seismic and Displacement Switches, Operation, and Door Operation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.13 Emergency Exit	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
1.14 Ventilation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
1.15 Signs and Operating Device Symbols	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
1.16 Rated Load, Platform Area, and Data Plate	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>3 TOP OF CAR</b>			
1.17 Standby Power Operation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.1 Top of Car Stop Switch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.18 Restricted Opening of Car or Hoistway Doors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.2 Car Top Light and Outlet	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.19 Car Ride	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.3 Top of Car Operating Device and Working Platforms	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.20 Earthquake Inspection and Tests (Seismic Zone 2 or Greater)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	3.4 Top of Car Clearance and Refuge Space	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2 MACHINE ROOM</b>				3.5 Normal Terminal Stopping Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1 Means of Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.6 Final and Emergency Terminal Stopping Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2 Headroom	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.7 Car Leveling Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.3 Lighting and Receptacles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.8 Top Emergency Exit	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4 Enclosure of Machine Room/Spaces, Control Room/Spaces	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.9 Floor & Emergency Identification Numbering	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.5 Housekeeping	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.10 Hoistway Construction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.6 Ventilation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.11 Hoistway Smoke Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.7 Fire Extinguisher	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.12 Pipes, Wiring, and Ducts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.8 Pipes, Wiring, and Ducts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.13 Windows, Projections, Recesses, & Setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.9 Guarding of Exposed Auxiliary Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.14 Hoistway Clearances	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.10 Numbering of Elevators, Machines, Controllers and Disconnect Switches	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.15 Multiple Hoistways	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.11 Disconnecting Means and Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.16 Traveling Cables and Junction Boxes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.12 Controller Wiring, Fuses, Grounding, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.17 Door and Gate Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.13 Governor, Overspeed Switch, and Seal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.18 Frame, Counterweight Guides, and Stiles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.14 Code Data Plate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.19 Guide Rails, Fastening, and Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.15 Circuit Controls, Including Static Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.20 Governor Rope	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.16 Machinery Supports and Fastenings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.21 Governor Releasing Carrier	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.17 Braking System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.22 Wire Rope Fastening and Hitch Plate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.18 Drive Machines	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.23 Suspension Means	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.19 Gears, Bearings, and Flexible Connections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.24 Top Counterweight Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				3.25 Car, Overhead, and Deflector Sheaves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				3.26 Broken Rope, Chain, or Tape Switch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## CHECKLIST FOR INSPECTION OF ELECTRIC ELEVATORS (Back)

Serial#: 20329093

	OK	NG	NA		OK	NG	NA
<b>3 TOP OF CAR (Cont'd)</b>							
3.27 Crosshead Data Plate and Rope Data Tags	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5.7 Car Frame and Platform	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.28 Counterweight and Counterweight Buffer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5.8 Car and Counterweight Safeties and Guiding Members	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.29 Counterweight Safeties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5.9 Buffers and Emergency Terminal Speed Limiting Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.33 Compensating Means	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
3.34 Earthquake Inspection and Tests (Seismic Risk Zone 2 or Greater)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5.10 Compensating Chains, Ropes and Sheaves	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4 OUTSIDE HOISTWAY</b>							
4.1 Car Platform Guard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5.16 Earthquake Inspection and Tests (Seismic Risk Zone 2 or Greater)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.2 Hoistway Doors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5.16.1 Seismic Rope Retainers and Snag Guards	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.3 Vision Panels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5.16.3(d) Verify Information on Layout Drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.4 Hoistway Door Locking Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
4.5 Access to Hoistway	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>6 FIREFIGHTERS' SERVICE</b>			
4.6 Power Closing of Hoistway Doors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.1 A17.1b -1973 through A17.1b - 1980	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.7 Sequence Operation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.2 A17.1 - 1981 through A17.1b - 1983	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.8 Hoistway Enclosure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.3 A17.1 - 1984 through A17.1a - 1988 and A17.3	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.9 Elevator Parking Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6.4 A17.1b - 1989 through A17.1d - 2000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.10 Emergency Doors in Blind Hoistways	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6.5.4 Monthly Test (Test Log Completed)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.11 Separate Counterweight Hoistway	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
4.12 Standby or Emergency Power Selection Switch	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6.5 Acceptance Checklist - A17.1 - 2000 and B44-00	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>5 PIT</b>				6.6 Acceptance Checklist - A17.1 - 2002 and B44-02	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.1 Pit Access, Lighting, Stop Switch, and Condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.7 Acceptance Checklist - A17.1 - 2004 and B44-04	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.2 Bottom Clearance and Runby	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.8 Acceptance Checklist - A17.1 - 2007 and B44-07	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.3 Final and Emergency Terminal Stopping Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.9 Acceptance Checklist - A17.1 - 2010 and B44-10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.4 Normal Terminal Stopping Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.10 Acceptance Checklist - A17.1 - 2013 and B44-13	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.5 Traveling Cables	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
5.6 Governor Rope Tension Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Comments: