



# Lift and Escalator Inspection Form



## Report Of Examination of Escalator / Conveyor - PM45

Work Order Number:	68293009	Date Inspected:	19/07/2019	Issue - 00:	LE-FM-0113
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### 1. Machine Details

Station:	<b>Escalator 13 - London Bridge Stn</b>	Manufacturer:	<b>O&amp;K</b>	Line:	<b>Jubilee</b>
Date Of Construction:	<b>29/07/1999</b>	Maintainer:	<b>LE-KONE</b>		

2.1. DESIGN AND CONSTRUCTION, ARE ALL PARTS OF THE ESCALATOR OF GOOD MECHANICAL CONSTRUCTION SOUND MATERIAL & ADEQUATE STRENGTH (SO FAR ASCERTAINABLE)

NOTE: GIVE DETAILS OF RENEWALS OR ALTERATION IN (5) AND (6) BELOW

2.2. MAINTENANCE: ARE THE FOLLOWING PARTS OF THE ESCALATOR PROPERLY MAINTAINED AND IN GOOD WORKING ORDER? IF NOT, STATE WHAT DEFECTS HAVE BEEN FOUND.

NOTE: GIVE DETAILS OF RENEWALS OR ALTERATION IN (5) AND (6) BELOW

3. INSPECTION CHECKLIST: INDICATE IN COLUMN PROVIDED YES, NO OR N/A (NOT APPLICABLE). WHERE "NO" IS INDICATED, RECORD OVERLEAF THE NECESSARY INFORMATION USING THE ITEM REFERENCE LETTER

a) Engineering Drawings	YES	l) Engineers Barriers	YES
b) Combs Combplates & Switches	YES	m) Machine Room Security	YES
c) Keyswitches	YES	n) Access/egress	YES
d) Handrail System & Entry Guard Switches	YES	o) Cleanliness/tidiness Of Machine Rooms	YES
e) Safety Devices		p) Lighting	YES
e.1.1) Safety Devices: No Volt-circuit	NO	q) Controller/annunciator/plc	YES
e.1.2) Safety Devices: Earth Detection Or Residual Current Device	YES	r) Motor	YES
e.2.1) Safety Devices: Underspeed Governor	NO	s) Gear	YES
e.2.2) Safety Devices: Overspeed Governors/ Encoder	NO	t) Brakes	YES
e.3.1) Safety Devices: Stop Diamond	YES	u) Drive Chains	YES
e.3.2) Safety Devices: Stop Buttons/isolators	YES	v) Newel Wheels & Bearings	YES
e.4.1) Safety Devices: Broken Handrail Detection Switch	NO	w) Inching Stations/buttons	YES
e.4.2) Safety Devices: Handrail Switches/sensors	NO	x) Lubricator	YES
e.5.1) Safety Devices: Missing Step/low Step Detectors	YES	y) Load Relieving Ramps	YES
e.6.1) Safety Devices: Carriage Switches	YES	z) Tracks	YES
e.7.1) Safety Devices: Kinked Link Detector	NO	aa) Chain & Trailer Wheels	YES
f) Passenger Barriers	YES	bb) Steps/pallets	YES
g) Step Side Clearances	YES	cc) Tension Carriage	YES
h) Brush Guard	NO	dd) Guarding	YES
i) Balustrade & Decking Panels	YES	ee) Circuit Breaker/main Isolator	YES
j) Step Chain Condition \ Chain Wear	YES	ff) Other Parts	YES
k) Step Treads	YES	gg) Cleanliness of Escalator	YES

4. WHAT PARTS (IF ANY) WERE INACCESSIBLE? **All enclosed parts**

5. REPAIRS, RENEWALS OR ALTERATIONS REQUIRED TO ENABLE THIS LIFT TO CONTINUE TO BE USED WITH SAFETY.

IF NO SUCH REPAIRS, RENEWALS OR ALTERATIONS ARE REQUIRED, ENTER "NONE" [PLEASE REFER TO PAGES 2 AND 3 FOR INSPECTION DETAILS]

a) IMMEDIATELY

**NO**

b) WITHIN A SPECIFIED TIME, THE SAID TIME TO BE STATED

**NO**



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### 6. DEFECTS (OTHER THAN THOSE SPECIFIED AT 5 ABOVE) WHICH REQUIRE ATTENTION. LIST URGENT AND OTHER

b) Combs Complates & Switches

Top comb :- 5 4 4

Bottom comb :- 4 4 4 [obs]

e.1.1) Safety Devices: No Volt-circuit

not tested

e.2.1) Safety Devices: Underspeed Governor

not tested lap top required to test

e.2.2) Safety Devices: Overspeed Governors/ Encoder

not tested lap top required to test

e.4.1) Safety Devices: Broken Handrail Detection Switch

not tested out of reach

e.4.2) Safety Devices: Handrail Switches/sensors

not tested out of reach

e.5.1) Safety Devices: Missing Step/low Step Detectors

missing step not tested.[obs]

e.7.1) Safety Devices: Kinked Link Detector

not tested

g) Step Side Clearances

Step side clearances :-

LH 3 3 3 4 3 2 3 2 3 2 3 4 3 2 3 2

BOTTOM

RH 3 2 4 3 4 3 2 2 3 4 3 3 3 2 3 [OBS]

h) Brush Guard

Upper LH landing brush guard lower taper piece missing. Existing WON.

j) Step Chain Condition \ Chain Wear

Step to step gap 3mm. [obs]

k) Step Treads

Several worn tread cleats.[obs]

### 7. OTHER OBSERVATIONS

Step Band Speed

0.75

M/SEC

Rh Handrail Speed

0.75

M/SEC

### 8. DATE OF INSPECTION

LAST

DUE

a. WORM GEARS TO BE EXPOSED AT 10 YEARLY INTERVALS



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b. THE OVERSPEED GOVERNOR TO BE TESTED EVERY 5 YEARS  
(IN ACCORDANCE WITH HEALTH AND SAFETY EXECUTIVE)

IN THE EVENT OF A SERIOUS DEFECT BEING DISCOVERED THE JNP FAULT REPORTING CENTRE MUST BE NOTIFIED IMMEDIATELY

I CERTIFY THAT ON	<b>19 Jul 2019 01:00</b>	I THOROUGHLY EXAMINED THIS ESCALATOR AND THAT THE FOREGOING IS A CORRECT REPORT OF THE RESULT
NAME OF THE INSPECTOR:	<b>Howard O'Connor</b>	Number: SIGNATURE:
QUALIFICATION:		
ADDRESS:	Asset Performance JNP LIFT & ESCALATOR PERFORMANCE SECTION OPERATIONS 15 WEST FERRY CIRCUS, CANARY WHARF LONDON, E14 4HD	

**Number of Records:**