

STATE OF CALIFORNIA
Cal/OSHA AMUSEMENT RIDE AND TRAMWAY UNIT
2424 ARDEN WAY SUITE 340, SACRAMENTO, CA 95825
OFFICE: (916) 263-3511 FAX: (916) 263-3576

SUBMITTAL FOR NEW HAUL ROPE GRIP FORM

Owner: _____

Tramway ID No: _____

Name of Tramway: _____

Type of Tramway: _____

Address of Owner: _____

Name of Professional Engineer: _____

Address of Professional Engineer: _____

Haul rope grip lifts shall be designed and tested according to Section 3173.1(a) and 3174.1(a).

The following information shall be submitted to the Division for review in order to assure compliance with these standards:

- Two complete sets of assembly and detail drawings
- Materials used in the construction of the grip
- Size of haul rope for which the grip was designed
- Maximum inclination of the haul rope for which the grip was designed
- Maximum loading, dead load plus live load, for which the grip was designed
- Maximum allowable line sheave load
- Minimum haul rope tension
- Minimum longitudinal carrier swing angle for grip
- Grips relation to haul rope splice
- Calculations showing compliance with safety factor against ultimate strength of material

- Calculations showing compliance with safety factor against yield point of material
- Calculations showing compliance with safety factor against grip slippage
- Spring force diagram
- Wrap angle of grip on nominal haul rope diameter
- Plucking force for grip
- Information for grip fatigue testing
- Instructions for attachment and installation of grip
- Instructions for cable and grip inspections

NOTE: More information may be requested by the Division in order to complete the review process.

Submit to:

State of California
Cal/OSHA
Tramway Section
2424 Arden Way, Suite 340
Sacramento, CA 95825
916-263-3511
Email: tram@dir.ca.gov
Website: www.dir.ca.gov/dosh/ARoffices.htm