STATE OF CALIFORNIA REQUEST FOR INSPECTION NEW INSTALL OR MODERNIZATION DIR DOSH 001 (Rev. 1/2025)				N DIVISION OF	DEPARTMENT OF INDUSTRIAL RELATIONS DIVISION OF OCCUPATIONAL SAFETY AND HEALTH – ELEVATOR UNIT		
TODAY'S DATE:		_					
DATE OF LETTER OF INTENT: EXECUTED CON				ONTRACT DATE:			
LOCATION							
Name of Building	:						
Street Address:							
City:							
Cross Street(s)							
REQUESTOR							
Company:							
Office:							
Requestor's Nam	าย:						
Telephone Numb	er:						
Mechanic perform	ning inspection	n:					
Mechanic's Telep	hone Number						
REQUESTED DATE FO		DN:					
EQUIPMENT INFORMA		# UNITS	DUPLEX				
Type of Equipment:			Installation G	Group Number:			
Variance # (If applicable):		State Numbe	er (If Issued):			
TYPE OF INSPECTION	REQUESTED)					
NEW	MODERNI	ZATION	Re-INS	SPECT			
IS THE GENERAL CON	TRACTOR 10	0% READY FO	OR INSPECTIO	N?	YES	NO	
IS THE ELEVATOR COMPANY 100% READY FOR INSPECTION?				_	YES	NO	
HAS ALL FLS TESTING BEEN PERFORMED BY CQCC & FIRE ALARM C					YES	NO	
		This section	is for DIR use:	:			
ASSIGNED TO:							
DATE OF INSPECTION	N:		T	IME:			
	MON	TUE	WEDT	HUFRI			