## FORM No. 9

(PRESCRIBED UNDER RULE 58 OF FACTORIES ACT)
Prescribed for report of examination of Hoist or Lift. (Occupier or Owner) of premises.

1. Name & address of Factory	:	
2. (a) Type of hoist or lift and identification number or description.	:	
(b) Date of construction or reconstruction (if ascertainable)	:	
3. Design and construction.	:	
Are all parts of the hoist or lift of good		
mechanical construction and of sound		
material of adequate strength.		
(so far as ascertainable) ? 4. Maintenance	:	
Are the following parts of the hoist or lift	•	
properly maintained and in good working		
order? If not, state what defects have been found.		
(a) Enclosure of hoist way or lift way.	:	
(b) landing gates and cage gate(s).	:	
(c) Interlocks on the landing gates and cage	:	
gate(s). (d) Other gate fastenings.		
(e) Cage or platform and fittings cage guides,	· :	
buffers, interior of the hoist way or lift way.	•	
(f) Over running devices.	:	
(g) Suspension ropes or chains and their attachments.	:	
(h) Safety gear i.e. arrangements for preventing fall of platform or cage brakes.	:	
(I) Brakes.	:	
<ul><li>(j) Worm or spur gearing.</li><li>(k) Other electrical equipment.</li></ul>	: •	
(l) Other parts.	· :	
5. What parts (if any) were inaccessible?	:	
6. Repairs, renewals or alterations (if any)	:	
required and the period within which	:	
they should be executed.  7. Maximum safe working load subject to		
repairs, renewals or alterations (if any)	•	
specified in [5]		
8. Others		
I / We certify that onI / we thoroughly examined the above mentioned lifting machine / rope / lifting tackle and that the above is a correct report of result.		
Signature :		
Comp. Reg. No: GUJ/DISH/CPT/A/0337/2013, Validity Period:		
Address:		
		Next Due: