All Registered Lift and Escalator Contractors

Dear Sirs,

Circular No. 7/96
Investigation Reports on Certain Occurrences

According to section 27A of the Lifts and Escalators (Safety) Ordinance, reports are required to be submitted by the registered lift contractors or registered escalator contractors to the Director of Electrical and Mechanical Services in respect of certain occurrences.

From time to time, supplementary information or clarifications on the reports have to be sought from the contractors as some of the reports received do not contain all the essential details. With a view to minimizing the need for clarification and possible delay in concluding a case, particularly the minor incidents, I would like to attach herewith the covering letter and reporting formats adopted by some contractors to illustrate the items which should generally be included in the occurrence reports. With the reporting formats readily retrievable from computers, the contractors can easily modify the formats for adding any particular items/details to suit the circumstances.

The registered lift engineer or the registered escalator engineer, as the case may be, who takes charge of the investigation and signs the report should indicate his name and registration number on the report. Being an occurrence report submitted by the contractor, it is also essential to have an authorized signatory of the contractor to sign the covering letter in forwarding the report to this Department.

As individual occurrence may require particular details to be included, please consider the need in each case and provide the necessary report. Although a standardized reporting format will be useful for ensuring the essential particulars are included in minor cases, I would like to emphasize that comprehensive reports giving full details must be submitted for major incidents.
Whilst your registered lift/escalator engineers and staff have always been very efficient and helpful in carrying out the necessary investigations on various occasions, it is also of prime importance that reports giving full details of the occurrences should be timely submitted for concluding a case.

Thank you for your cooperation and attention in the matter.

Yours faithfully,

(G.M.W. CHUI)
for Director of Electrical & Mechanical Services

c.c. AD/BS
D of Housing

YKH/GMWC/tlp
The Director of Electrical & Mechanical Services
98 Caroline Hill Road
Causeway Bay
Hong Kong

Dear Sir,

Occurrence dated
at (Lift/Escalator No. & Location)
EMSD Location No: ____________________________

In accordance with Section 27A of the Lifts and Escalators (Safety) Ordinance, we submit the occurrence report with details of the incident for your information.

Should you require any further information or assistance, please do not hesitate to contact us.

Yours faithfully,

________________
(Name)
Signature of Registered Contractor

Encl.
Occurrence Report

Lift

EVENT:
Date: ____________________
Time: ____________________
Registered Lift Contractor was Informed on: ____________________

LOCATION:
EMSD Location No.: ____________________
Lift Location: ____________________
Lift No.: ____________________

Particulars of the Installation:
Application: ____________________ (Note 1)
Manufacturer: ____________________
Capacity: ________ persons ________ kg
Drive: ____________________ (Note 2)
Speed: ____________________ m/s
Control: ____________________ (Note 3)
Floors Served: ____________________
Door Type: ____________________ (Note 4)

BRIEF DESCRIPTION OF OCCURRENCE:
(Note 5)

DETAILS OF VICTIM (If any):
Name: ____________________
Age: __________
Sex: ________________
Injured Condition: ____________________
Occurrence Report

INVESTIGATION:

(Note 6)

________________________________________
________________________________________
________________________________________
________________________________________
________________________________________

PRINCIPAL CAUSES:

(Note 7)

________________________________________
________________________________________
________________________________________
________________________________________
________________________________________

MEASURES TAKEN:

(Note 8)

________________________________________
________________________________________
________________________________________
________________________________________
________________________________________

Reported By: ____________________________ Signature: ____________________________
RLE No.: ______________________________ Date: ______________________________
Registered Lift Contractor: ______________________________
RLC No.: ______________________________
Contractor Report Ref.:

Occurrence Report

(Escalator)

EVENT:  Date: ____________________________  Time: ____________________________
Registered Escalator Contractor was Informed on: ____________________________

(Date & time)

LOCATION:  EMSD Location No.: ____________________________
Escalator Location: __________________________________________

Escalator No. : __________________________________________

Particulars of the Installation:

Floors Served : ____________________________  Manufacturer : ____________________________
Rise : ____________________________ m  Speed : ____________________________ m/s
Angle of Inclination: _____________ degree  Step Width : ____________________________ m

BRIEF DESCRIPTION OF OCCURRENCE:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

DETAILS OF VICTIM (If any):

Name: ____________________________  Age: ____________  Sex : ____________________________
Injured Condition : ____________________________
Contractor Report Ref.: 

Occurrence Report 

INVESTIGATION: 


PRIM ARY CAUSES: 


MEASURES TAKEN: 


Reported By: __________________________ Signature: __________________________
REE No.: __________________________ Date: __________________________
Registered Escalator Contractor: __________________________________________
REC No.: __________________________
Explanatory Notes for the Items

1. Application - passenger, freight or service lift

2. Drive - electric, hydraulic

3. Control - VVVF, AC2, etc

4. Door Type - power-operated or manual, number of panels, side/centre opening, etc.

5. Brief Description of Occurrence - A description of the occurrence should be provided to reflect the sequence of events. It is important to point out the extent of any damage to the installation or injury to any person. Any information provided by the owner or caretaker should be clearly stated as such.

6. Investigation - Full details of the investigation and findings should be given. Relevant photographs with captions/descriptions are to be provided. In general, it is necessary to report the result of the checking of related safety devices, clearances, warning notices, etc.

7. Primary Causes - The possible cause and how it is concluded from the findings should be given.

8. Measures Taken - Any relevant action or recommendation to prevent recurrence should be stated. The registered lift engineer or escalator engineer, as the case may be, who examines/tests the installation before it is again put into operation, should confirm that the installation is in safe working order (with name of engineer and date of examination/testing stated).