



Office of the Illinois
State Fire Marshal

"Partnering With the Fire Service to Protect Illinois"

ELEVATOR SAFETY DIVISION
312-814-1325

October 11, 2012

To: All Municipalities and Counties with a Current Local Agreement

RE: Revised Municipality Agreement

Enclosed, please find a revised Illinois Elevator Safety Program Agreement which has been prepared by the Office of the State Fire Marshal ("OSFM") for your review and signature. The revisions included in this Agreement reflect important changes made to the Illinois Elevator Safety Rules, which became effective on October 1, 2012. Additional changes to the Agreement address programmatic modifications implemented by the OSFM, as the Administrator of the Elevator Safety Act. Ultimately, these changes will better serve the conveyance-riding public within your Municipality or County.

This Agreement constitutes a voluntary contract between the OSFM and your Municipality or County, permitting you to operate an Elevator Safety Program in conformance with Section 140 of the Elevator Safety and Regulation Act (225 ILCS 312/140), and the Administrative Rules (41 Ill. Adm. Code 1000). Absent such an Agreement, authority over your local elevator program reverts to the OSFM.

Please review the attached Illinois Elevator Safety Program Agreement Checklist, which outlines the documentation and information the OSFM needs in order to review your Agreement. Please sign and return the Agreement to the Office of the State Fire Marshal at 100 W. Randolph, Suite 4-600 Chicago, Illinois 60601 **no later than March 1, 2013**. Failure to submit a complete and signed Agreement within the specified timeframe could result in proceedings to revoke your Agreement and elevator program.

If you have any questions, please do not hesitate to contact our office.

Sincerely,

A handwritten signature in cursive script that reads "Robert Capuani".

Robert Capuani
Director, Elevator Safety Division

mj
enclosures

Illinois Elevator Safety Program Agreement Checklist

The Local Authority shall submit to the OSFM as part of the *Illinois Elevator Safety Program Agreement* the following: (Please label the following items as shown below.)

#1

- Two (2) copies of the signed *Illinois Elevator Safety Program Agreement*.

#2

- A. Name and contact information of the individual that manages your elevator program.
- B. The name and contact information of any third party inspection company(ies) under contract with you to perform your inspections and/or the name and license number of the inspector(s) employed by you to perform such inspections.
- C. The number and type of conveyances that you currently inspect, excluding residential conveyances. Please identify the **type** of conveyance (Hydro Elevator, Traction Elevator, Escalator, Dumbwaiter, Moving Sidewalk/People Mover, Lift, Handicapped Lift (Platform or Stairway Chairlift)).

You may find a copy of the *Application for Registration of Conveyance* on our website at www.sfm.illinois.gov.

Please mail the signed *Illinois Elevator Safety Program Agreement* to the following address:

Mr. Robert Capuani, Director
Elevator Safety Division
Office of the State Fire Marshal
James R. Thompson Center
100 West Randolph Street, Suite 4-600
Chicago, Illinois 60601

Please contact us if you have any questions.