

Elevator Unit Field Report

State of California DIR/DOSH

1	Date of Inspection: 10/31/23	Inspectors ID: TF427	Agency	<input checked="" type="checkbox"/> Private <input type="checkbox"/> City	<input type="checkbox"/> County <input type="checkbox"/> State	Office-ID: 04	Elevator Number: 051536
2	Location address: 900 FALLON ST		City: OAKLAND	Zip: 94607	Building Name: LANEY COLLEGE		
3	Elevator Service Co.: KONE	Company ID: 316	Survey Type: R1	Permit <input checked="" type="checkbox"/> 1 year <input type="checkbox"/> 2 Year <input type="checkbox"/> Other	<input type="checkbox"/> Temp. Construction	No Permit Until Reinspect <input type="checkbox"/>	Release Permit: <input type="checkbox"/>
4	Safety Requirements: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Number Of Req's: 1	Alternate Procedure <input type="checkbox"/>	Req.'s	Inspection Time: 1.5 Hrs	Inspection Fee: \$ 350 .00	

Site Contact

5	Recommendations Explained To: (Name) FERNANDO	Position: MAINT
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Responsible Party Information

6	Company: PERALTA COMMUNITY COLLEGE	Attn: MIKE
7	Address: 333 E 8TH ST	Suite:
8	City: OAKLAND	State: CA
9	Prime Phone: [REDACTED]	Alt. Phone:
10	Elevator Company: <input type="checkbox"/> Send Invoice	Company ID:
		Elevator Company Office location (City):

EV Data

11	Elevator Model: SAME	Controller Model: MONTGOMERY	Install Group: II	Alteration Group:	Alteration date:		
12	Governor Model: SAME	Safety Model: SAME	Battery Rescue:	Cab Flooring: Other 06	Cab Walls: Stainless steel 03	Cab Ceiling: T-bar 01	5 Year Check:
13	Access Keys: EX514	Rupture Valve: N/A	Speed: 350	Capacity: 2500	No. of landings: 10	Class: 00	

Escalator Data

14	Escalator Model:	Controller Model:	Install Group:	Alteration Group:	Alteration date:			
15	Upper Impact	Right:	Center:	Left:	Vertical:	Missing Step:	Lvl Step:	Seismic location:
16	Lower Impact	Right:	Center:	Left:	Vertical:	Missing Step:	Lvl Step:	Handrail stall time:
								Min. Brake Torque:

Comments / Notes

R1 sleeves 05, Attached

Show Cause	Tag Order	Validation
		2012472



Oakland District Office
1515 Clay Street, Suite 1301
Oakland, CA 94612
Phone: 510.622.3026
Fax: 510.622.3045

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

**PRELIMINARY
ORDER**

November 17, 2023

PERALTA COMMUNITY COLLEGE DISTRICT
DEPARTMENT OF GENERAL SERVICES
333 E 8TH ST
OAKLAND, CA 94606-2844

NOTE: Pay invoice E20124720A within 60 days from its issuance to avoid a 100% penalty assessment. All fees are due IMMEDIATELY upon receipt of the invoice.

A survey of your Passenger, Overhead Traction, EV N, State Number 051536, located at 900 Fallon St, Oakland, was made on October 31, 2023 by EU Engineer, T. Fernandez.

Person Contacted: FERNANDO Compliance date: January 01, 2024.

The conditions in need of correction are noted below. The numbers following the listed items refer to the sections of the California Code of Regulations (Title 8), or the Labor Code (L.C.) of the State of California.

1. Cab and hoistway doors shall fully open at all floors. Title 8, 3000(h)

Notification in writing that **each of the listed items** have been complied with shall be submitted to the above listed District office on the Compliance Form available at www.dir.ca.gov/dosh/ElevatorPubs_forms.html before the **PERMIT TO OPERATE** will be issued. Failure to Notify the Division within the allotted time may result in additional Penalties being assessed.

NO PERMIT WILL BE ISSUED UNTIL NOTIFICATION HAS BEEN RECEIVED AND ALL FEES ARE PAID.

Dave Henderson, Senior Safety Engineer

/tf

Elevator Unit Field Report

State of California DIR/DOSH

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4	Safety Requirements: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Number Of Req's	Alternate Procedure <input type="checkbox"/>	Req.'s	Inspection Time: .50 Hrs	Inspection Fee: \$.00	

Site Contact

5	Recommendations Explained To: (Name) FERNANDO	Position: MAINT
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Responsible Party Information

6	Company: PERALTA COMMUNITY COLLEGE	Attn: MIKE
7	Address: 333 E 8TH ST	Suite:
8	City: OAKLAND	State: CA
9	Zip: 94606	
9	Prime Phone: [REDACTED]	Alt. Phone:
9	Email:	
10	Elevator Company: <input type="checkbox"/> Send Invoice	Company ID:
10	Elevator Company Office location (City):	

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16	Lower Impact	Right:	Center:	Left:	Vertical:	Missing Step:	Lvl Step:	Handrail stall time:
								Min. Brake Torque:

Comments / Notes

R1 WAS COMPLETED

Show Cause	Tag Order	Validation
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Department of Industrial Relations
Division of Occupational Safety and Health
ELEVATOR UNIT

Oakland District Office
1515 Clay Street, Suite 1301
Oakland, CA 94612
Phone: 510.622.3026
Fax: 510.622.3045

DISPOSITION OF SC/TAG ORDER
 Check One:
 Served in Person on _____
 Served by Certified Mail on _____
 Tag Order Served & Equip. Sealed On _____
 or
SHOW CAUSE TAG ORDER NOT SERVED
 Employer Compliance
 Extension Recommended / _____ Days (See S-200)
 Further Legal Action Indicated
 By
 Engineer TP427 Date 10/31/23

ORDER PROHIBITING USE

October 9, 2023

Peralta Community College District
Department Of General Services
333 E 8th St
Oakland, CA 94606-2844

Upon an inspection and/or investigation on May 17, 2023, the Division has determined that Passenger, Overhead Traction, EV N, State Number 051536, located at 900 Fallon St, Oakland, is not in compliance with Title 8, Elevator Safety Orders, and is being operated without a valid permit.

THEREFORE USE IS PROHIBITED (California Labor Code) Section 7301, 7302, 7305 and 7320.

NOTICE OF HEARING

NOTICE IS HEREBY GIVEN THAT IF YOU SO REQUEST YOU WILL BE PROVIDED A HEARING OF THIS ORDER PROHIBITING USE ON THE VALIDITY OF THIS ORDER. IN THE EVENT THIS ORDER PROHIBITING USE HAS NOT BEEN REVOKED OR VACATED PRIOR THERETO, YOU ARE HEREBY NOTIFIED THAT YOU WILL BE PROVIDED A HEARING BY THE CHIEF OF THE DIVISION OF OCCUPATIONAL SAFETY AND HEALTH OR HER OR HIS DESIGNEE.

Hearing Requested: _____
 Date of Hearing at 10 a.m.: _____
 Location of Hearing: _____

DECLARATION OF SERVICE

Declaration of Service
 Copy Left With: Mike
 Order Served by: TP427
 Date: 10/31/23

**AUTHORIZATION
 CHIEF OF THE DIVISION
 OCCUPATIONAL SAFETY & HEALTH**

[Signature] FOR DH
 D. Henderson, Senior EU Engineer

NOTICE (Red Tags) prohibiting use were attached and shall not be removed except as authorized by the Division. The Labor Code prohibits use except with the Division's knowledge and permission. Contact the local elevator unit office prior to removing tag or attempting repairs.
 Standard, Order or Code Requirements & Description of Hazard Violated*

Inspector: T. Fernandez
 continued on next page

ORDER PROHIBITING USE
October 9, 2023

Elevator # 051536

Address: 900 Fallon St, Oakland

REQUIREMENTS FOR Passenger, Overhead Traction, EV N, NO. 051536 - CONTINUED

1. As the Division found your Conveyance to be out of service and your Permit to Operate has expired, you shall notify the Division when the conveyance can be inspected. If it is the intent to discontinue use of the conveyance it shall be properly landed and removed from service by a Certified Qualified Conveyance Company. Failure to notify the Division when the conveyance can be inspected or operation of a conveyance without a proper permit may subject you to fines up to \$1,000. Labor code 7320

It is further ordered that the aforesaid shall be corrected and you are admonished to prohibit the use and operation of the affected unsafe device until said conditions have been rectified; and the Legal Bureau and/or any employee of the Division are hereby authorized to attach notice of said prohibition to said unsafe device and to institute any civil or criminal proceedings in the Courts which may be necessary to adequately enforce this order.

DIVISION OF OCCUPATIONAL SAFETY AND HEALTH



Dan Barker
Lead Senior Safety Engineer
Elevator Unit

/tf

