项目名称： 楼栋： 电梯编号：

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 类别 | 日期  检查项目 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 机房部分 | 机房卫生情况 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 设备表面卫生情况 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 机房门锁 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 防鼠设施 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 曳引机运行 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 机房消防设施 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 机房室温(℃) |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 机房通风 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 机房照明/应急照明 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 轿厢部分 | 运行舒适性 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 厅门和轿门开关 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 轿厢照明 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 五方对讲 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 轿厢通风/空调 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 检查人 | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 审核人 | |  | | | | |  | | | |  | | | |
| 异常/故障情况描述及跟进处理措施 | |  | | | | |  | | | |  | | | |

备注：如检查结果正常，则在对应栏内打“√”，如异常，则打“×”，并在“异常/故障情况描述及跟进处理措施”栏内详细记录。