



TEXAS DEPARTMENT OF LICENSING AND REGULATION

P. O. Box 12157 • Austin, Texas 78711
(800) 803-9202 • (512) 463-6599 • FAX (512) 475-4870
www.license.state.tx.us • elevators.escalators@license.state.tx.us

APPLICATION FOR: **Elevator or Escalator Delay or Waiver**

PURSUANT TO CHAPTER 754, HEALTH AND SAFETY CODES, SUBCHAPTER B, INSPECTION, CERTIFICATION AND REGISTRATION

Do Not Write in the Fee Area Immediately Below

RECEIPT NUMBER	PMT. AMOUNT	MONEY TYPE

DO NOT WRITE ABOVE THIS LINE

NOTE: ALL INFORMATION MUST BE TYPED OR PRINTED IN INK. FILE THIS FORM WITH THE CORRECT FEE OF \$50.00 PER DELAY OR WAIVER REQUESTED

BUILDING NAME					
BUILDING DESIGNATION				INSPECTION DATE	
BUILDING ADDRESS				TDLR Building ID#	
CITY			STATE	TEXAS	ZIP
ELBI -					

REASON FOR REQUESTING DELAY OR WAIVER

LIST SPECIFIC VIOLATION(S) REQUESTING TO BE DELAYED OR WAIVED

TXE DECAL #	YEAR INSTALLED OR MODERNIZED	CODE RULE # AND DESCRIPTION	DELAY UNTIL DATE OR WRITE "WAIVER"

BY SIGNING THIS APPLICATION, I CERTIFY THE ABOVE IS TRUE AND CORRECT.

OWNER OR AGENT FOR OWNER SIGNATURE

DATE

BUILDING OWNER OR REPRESENTATIVE MUST REPORT ALL ACCIDENTS INVOLVING EQUIPMENT TO THE DEPARTMENT, USING A DEPARTMENT APPROVED FORM, BY THE FASTEST MEANS AVAILABLE AND IN WRITING WITHIN 72 HOURS.