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| **QEI Company:** |
| **QEI Address:** |
| **Phone:** |



**THIRD PARTY QEI SAFETY INSPECTION VIOLATION NOTICE**

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| **Building/Site Name:** | | |
| **Site Address:** | **City:** | **Zip Code:** |

**Unit Registration Numbers Is the Unit Placed Out of Service Per 8.11.1.4 Y\_\_\_ N\_\_\_**

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| **U1:** | **U2:** | **U3:** | **U4:** | **U5:** | **U6:** |

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| --- | --- | --- | --- | --- | --- | --- |
| **Page #** | | | **Inspection Date** | **Inspector Name** | **ID # / License #** | **Safety Code & Year** |
|  | of |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Code Rule** | **Violation Description** | **Unit #** | | | | | |
| **1** | **2** | **3** | **4** | **5** | **6** |
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Following an inspection of the above referenced equipment, Safety Violations were identified. It is your obligation to correct the above deficiencies, subject to Article-Public Safety, Title §12 - 814. Failure to comply may result in one or more of the following:

1. State of Maryland Department of Labor Elevator Safety Inspection Unit will post notice prohibiting the elevator/equipment from use.
2. If an owner continues to operate an elevator with an expired certificate after notice is issued, the State of Maryland Department of Labor Elevator Safety Inspection Unit will proceed to issue citations as allowed by law.

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| **Signature of Owner or Authorized Agent Acknowledging Receipt of Order** | **Signature of Authorized Third Party Inspector** |
| **Print Name:** | **Print Name:** |