BUILDING CODE SERVICES DIVISION | ELEVATOR SAFETY
2307 West Broward Boulevard, Suite 300 • Fort Lauderdale, Florida 33312 • 954-765-4400 Option #4 • Fax: 954-765-4785 • elevators@broward.org

Record of Visit (ROV)

To be completed by registered elevator company after work is performed as part of a service maintenance contract.
Sec. 21-8, Broward County Code of Ordinances**.**

Elevator Service Company Information

Registered Elevator Company Name			Registered Elevator Company No.
Certified Elevator Inspector Name			Certificate of Competency No.
Company Address	City	State	Zip

Elevator Information

BCID No. ☐ Elevator ☐ Moving Walkway		Service Date	Service Time **Hour** **Minute** : ☐ **AM** ☐ **PM**	
Physical Address of Elevator	No. of Floors	City	State	Zip
Building Owner Name		Building Owner Phone		

Record of Visit:

Signature below acknowledges receipt of this Record. Signature does not indicate whether owner is satisfied with work performed.

Building Owner's Signature _____ Date _____

Certified Elevator Technician's Signature _____ Date _____

Printed Name _____