



Print

BUILDING CODE 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

**Third-Party Certified Elevator Inspector (CEI)
Registration Form Instructions**

1. Complete this registration and password policy form and return, in person at the address above, with all necessary supporting documents and application fee.
2. We will try to review and approve your documents and issue a username and password to you the same day you apply. If our review takes longer, we will contact you soon after. You will receive written notification from us within 20 working days.

You must bring the following:

1. Official and Current State of Florida Department of Business and Professional Regulation Elevator Inspector License.
2. A copy of your Certificate of Liability Insurance:
 - A) **Minimum Limits:**
You must have a valid Certificate of Liability Insurance with the following limits on file with the Division of Hotels and Restaurants, Bureau of Elevator Safety:
Per person \$100,000; Per occurrence.....\$300,000
 - B) **Certificate Holder:**
Building Code Division
2307 West Broward Boulevard,
Suite 300
Fort Lauderdale, Florida 33312
Certificates must provide at least 30 days advance notice of cancellation
3. Valid driver's license

Fee and Payment Methods

\$25.00 Processing Fee (*non-refundable*)

- **Cash:** In person only
- **Check:** Make checks payable to: *Broward County Board of County Commissioners*



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Third-Party Certified Elevator Inspector (CEI) Registration Form TPR01

Business Information				
CEI License No.				
Last Name	First Name	Middle Initial	Suffix	
Home Address	City	State	Zip	
Home Phone	Mobile Phone			
Driver License No.	Email			
Business Name				
Business Address	City	State	Zip	
Business Phone	Business Mobile Phone			
Terms and Conditions				
<ol style="list-style-type: none"> 1. An approved Third Party CEI shall perform only Routine/Annual/Category 1/Category 5 inspections at elevators (elevators include escalators and other devices as defined in Chapter 399 F.S) in Broward County, and if necessary, perform Call-Back inspections within 90 days of completing the routine inspection. A registered Third-Party CEI shall not perform complaint or accident report inspections nor inspections at new installations/alterations/repairs. The Third-Party CEI shall advise staff of the Elevator Section if any of these inspections are required. 2. An approved Third-Party CEI shall be considered "...a person authorized by the authority having jurisdiction" (ASME 17.1-2007, Section 8.11.1.1.1) and shall perform "periodic inspections" and witness "periodic tests." Broward County requires that both a Category 1 periodic test and periodic inspection be conducted annually. The County also requires that a Category 5 periodic test be completed once-every-five years. In addition to the annual periodic inspection. 3. An approved Third-Party CEI shall only use the appropriate electronic inspection report found in the Elevator Section's reporting system (POSSE) to capture inspection results and shall submit completed inspection reports within 5 calendar days after completion of an inspection. If an approved Third-Party CEI determines he/she is unable to submit the report within 5 days, he/she shall advise the Elevator Section Supervisor prior to deadline. 				

Terms and Conditions *(continued)*

4. An approved Third-Party CEI shall verify and update the email address of the Elevator Owner as contained in the POSSE system to ensure that the Elevator Owner receives a copy of the inspection report.
5. An approved Third-Party CEI shall ensure that the Certificate of Competency (CC Number) information for the technician performing periodic tests is captured in POSSE's electronic inspection report form.
6. An approved Third-Party CEI shall become familiar with all procedures found in the manual titled, "Broward County Elevator Section, Web Inspections – Training Outline" and follow directions.
7. Random monitoring inspections shall be performed by Elevator Section staff and an approved Third-Party CEI shall receive a copy of the monitoring inspection report completed by the Elevator Section Monitoring Inspector along with additional information potentially summarizing any discrepancies/omissions/errors, if any are observed. If discrepancies/omissions/errors are observed by the Monitoring Inspector and the "Third-Party CEI Response Required" field is checked, the approved Third-Party CEI shall provide a written response to the Elevator Section Monitoring Inspector that explains the inspections procedures and applications used to prepare the inspection that was found by the Monitoring Inspector to contain error or omissions of code violations or tests (Section 399.061 (5) F.S.). The Elevator Section may request follow-up consultations with Third-Party CEI.
8. Building Code Regulated Business Administrator or the Building Code Division's Director reserves the right to terminate the participation of any approved Third Party CEI from Third Party CEI Program. The Third-Party CEI shall receive official notification confirming termination from the Program and relevant information will be removed from the appropriate web site.
9. If an approved Third-Party CEI determines he/she no longer wants to participate in the Program, the Third-Party CEI shall submit a written notification to the Elevator Safety Section confirming termination of participation.

By signing below, I acknowledge that I agree to abide by the program's requirements and have read and understood referenced procedures and manuals.

Name

Signature

Date



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Broward County Password Policy Form TPR02

You must complete this form and submit it to the POSSE Security Administrator before you will receive access to use our website to enter POSSE inspections.

You must observe the following guidelines:

- A.** You must ensure that your password length is at least ten characters long and contains at least one of each character from the following four categories:
 - 1. Cannot use last 24 passwords and cannot reuse passwords in the last 365 days (these conditions work together)
 - 2. At least 10 characters long
 - 3. At least one (1) UPPER CASE letter (A... Z)
 - 4. At least one (1) lowercase characters (a...z)
 - 5. At least one (1) number (0...9)
 - 6. At least one (1) special character (cannot use both single and double quotes “,” ””)
- B.** You must never use any part of your name in your passwords.
- C. Passwords expire every 90 days**
- D.** You must never use weak passwords such as “password”, “123456789”, or common passwords such as names of family members, pets, birthdays, or County terminology.
- E.** You must not insert your passwords into email messages or other forms of electronic communication.
- F.** You must not write down or print your passwords.
- G.** You should use passphrases to help remember complex passwords.
- H.** You must not display your passwords on your monitor, workspace, or desk.
- I.** You must not share your password with anyone else.
- J.** You must not save your passwords when prompted by a web browser or application.

I have read the above and ensured that my POSSE password meets or exceeds these guidelines. I will follow all the above guidelines.

Name

Signature

Date