



PORT OF SEATTLE INSPECTION - DETAILED REPORT

Inspection #: 871211

Entity Information

Entity Name PORT OF SEATTLE

Primary Contact Name VIRGINIA FULLWOOD Primary Contact Phone 206-556-1678

Primary Contact Email FULLWOOD.V@PORTSEATTLE.ORG

Permit Mailing Address SUSIE ARCHULETA 2711 ALASKAN WAY, SEATTLE, WA 98121

Inspection Information

Inspection Form Annual Inspection - Escalator Inspection Status Completed (Passed - With

Deficiencies Found)

Permit # 320176 Permit Paid Date

Inspection Number 871211 Inspection Type Annual

Inspection Start Date 04/09/2025 Inspection End Date 04/09/2025

SOD Issue Date 04/09/2025 POC Due Date 07/09/2025

Expiration Date 02/01/2026

Comments

Conveyance Information

Conveyance # 22225 Conveyance Designation #1

Conveyance/Escalator Manufacturer KONE Conveyance/Escalator Model

Site Location Address CRUISE TERMINAL, PIER 91 2001 W GARFIELD, SEATTLE, WA 98119

Inspection Team Information

Inspection Outcome - Annual

| SETH LAMB | Inspector |
|-----------|-----------|
| Name | Role |
| | |

| Tag | Question | Response |
|------------------|--|--------------------|
| Outcome - Annual | The results of the annual inspection are as follows: | Deficiencies found |
| | Remarks A002 - THIS CONVEYANCE HAS BEEN INSPECTED AND THE FOLLOWING DISCREPANCIES WERE NOTED AND SHALL BE CORRECTED WITHIN 90 DAYS. WHEN CORRECTIONS ARE | |

FOLLOWING DISCREPANCIES WERE NOTED AND SHALL BE CORRECTED WITHIN 90 DAYS. WHEN CORRECTIONS ARE COMPLETED PLEASE INDICATE IN THE BOX PROVIDED NEXT TO EACH DISCREPANCY THAT IT HAS BEEN COMPLETED. UPON COMPLETION OF ALL CORRECTIONS, OWNER, PLEASE DATE AND SIGN BELOW AND RETURN A COPY OF THIS REPORT TO OUR OFFICE BY THE DUE DATE.

| Annual - Escalator | | | | |
|--------------------|---|---|--|--|
| Tag | Question | Response | | |
| 1 | Operating Certificate Posted and Current - RCW 70.87.090 | Deficiencies found - 90 day correction required | | |
| | Inspector Comments: Operating Certificate posted is expired. | · | | |
| 34 | Must keep handrails free from cuts, cracks, pinch points and other hazards Å 许庇 许强D | No apparent deficiencies | | |
| 35 | Must keep covers secure, no tripping hazards, maintain open area for a&&•• 柏 | No apparent deficiencies | | |
| 36 | Must keep safety decals or signs in good shape for passengers to read Å 许克 许文 | No apparent deficiencies | | |
| 37 | Must keep comb teeth and escalator step edges operable, demarcation means - 8.11.4.1(g) | Deficiencies found - 90 day correction required | | |
| | Inspector Comments: Replace damaged steps. | | | |
| 38 | Must maintain gap between moving step and stationary skirt panel 3/16-1/4. 協 許能 文 D | No apparent deficiencies | | |
| 39 | Must keep excessive play or rocking movement in steps to a minimum - Å 许庇 许如 | No apparent deficiencies | | |
| 40 | Check MCP Cat 1 info, tasks w/dates, tests, repairs, callbacks, start-up * | No apparent deficiencies | | |
| 41 | Check emergency stop switch and cover alarm operable if provided - Å 许克 许及 | No apparent deficiencies | | |
| Additional In | spection Items | | | |
| Tag | Question | Response | | |
| ADDL 1 | V@^Á[[,ā]*Ánc^{Á^•` c^åÁngÁns^-a8an}8an•Ál[`}åkÁ | N/A | | |
| ADDL 2 | V@^Á[[,ā]*Ánc^{Á^•` c^åÁnjÁn^-a8an}8an•Á[`}åkÁ | N/A | | |
| ADDL 3 | V@^Á[[,ā]*Áac^{Á^•` c^åÁajÁa^-a&a^}&a•Á[`}åhÁ | N/A | | |
| ADDL 4 | V@^Á[[¸ā]*Ánc^{Á^•` c^åÁnjÁn^-a8an}8an•Á([`}åhÁ | N/A | | |
| ADDL 5 | V@^Á[[¸ā]*Ándr^{Án•* c^å/ÁnjÁnn^-a&an}&an-Án[*}ålnÁ | N/A | | |
| ADDL 6 | V@Á[[, ā]*Ánc^{ Á^• c^åÁnjÁn^-a&a^}&a •Á[ັ}åhÁ | N/A | | |
| ADDL 7 | V@Á; [, ā) *Ánc^{ Á^• c^å/ā) Án^-æða} &æ •Á; `}åhÁ | N/A | | |
| ADDL 8 | V@Á[[, ā]*Áse^{Á^•* c^åÁsjÁs^-a8an}8an•Á[*}åkÁ | N/A | | |
| ADDL 9 | V@Á[[, ā]*Áse^{Á^•* c^å/Ág Ási^-a&a^}&a*•Á[*}åkÁ | N/A | | |
| ADDL 10 | V@^Á[[[, ā]*Ánc^* c^åÁnjÁn^-3&a^}&a^•Á[*]åkÁ | N/A | | |

If you have any questions, please email the Elevator Program at elevatorsect@lni.wa.gov or you can call us at (360) 902-6130. Please include your Inspection Number in your communication