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## 1. GENERAL REQUIREMENTS

- A. An elevator machine room shall be provided for each individual elevator or group of elevators. The elevator drive machine and elevator controller shall be in the same code approved machine room.
- B. The design of elevator systems (locations, equipment selection) for new facilities shall be included in the A/E contract with specification sections prepared for each elevator system. Equipment selection shall be the most life cycle cost effective system including maintenance, operations, and installation cost.
- C. Elevators shall be provided in all facilities having two (2) or more floors and shall be designed for the traffic anticipated. Passenger and service elevators shall be sized to accommodate transport equipment used by persons with special needs (wheelchairs, motorized scooters, walkers, etc.).
- D. The latest editions of the publications listed constitute the minimum requirements for elevator transportation systems, including design, methods of construction, manner of installation, and testing:
  - 1) American Society of Mechanical Engineers (ASME) Safety Codes for Elevators - A17.1, A17.3, A17.4, A17.5, A17.6, A18.1
  - 2) National Fire Protection Association (NFPA) - 13, 70, 72, 101, 252
  - 3) International Building Code (IBC)
  - 4) Guide for Inspection of Elevators - A17.2
  - 5) Standards for the Qualification of Elevator Inspectors – ANSI/ASME QEI-1
  - 6) American Society of Safety Engineers (ASSE) – Personnel Hoists and Employee Elevators on Construction and Demolition Operations A10.4
  - 7) VA Barrier Free Design Standard - PG-18-13
  - 8) VA Seismic Design Handbook - H-18-8
- E. NFPA 101 primarily addresses life safety and fire protection features while the IBC addresses a wide range of considerations, including, but not limited to, structural strength, stability, sanitation, adequate light, ventilation, and energy conservation. VA buildings must meet the requirements of NFPA 101, and documents referenced by NFPA 101 in order to comply with the accreditation requirements of The Joint Commission. Therefore, designs shall comply with the requirements of the latest edition of NFPA 101, and documents referenced therein. Design features not addressed by NFPA 101 or included references shall comply with this manual or IBC. NFPA 101 and included references shall take precedence over IBC.
- F. Should a conflict exist between VA requirements and VA adopted nationally recognized codes and standards, the conflict shall be brought to the attention of the VA. The resolution of conflict shall be made by the VA Authority Having Jurisdiction (AHJ).



- G. Where conflicts are found between this document and other VA publication this document shall take precedence. The conflict shall be brought immediately to the attention of the Project Manager and AHJ shall verify applicability to the project.
- H. Refer to PG-18-3 Topic 18 for the qualification requirements for the designers/consultants for this work. All studies and designs are to be provided by independent, experienced, and qualified consultant that normally performs Vertical Transportation Studies and design as a standard part of their services.
- I. The VA Contracting Officer shall obtain the services of a third-party ANSI/ASME Qualified Elevator Inspector-1 (QEI-1) to oversee elevator acceptance testing. Within 2 weeks after the inspection, the QEI must prepare a formal inspection report, including all test results and deficiencies. The QEI must utilize an Elevator Acceptance Inspection Form to record the results of inspection and all testing and to identify safety code and contract deficiencies. Specific values must be provided for all tests required by ASME A17.1, ASME A17.2, and the contract documents. Upon successful completion of acceptance inspection and testing, the QEI must sign the Elevator Acceptance Inspection Form and provide a copy to the Contracting Officer. The signed Elevator Acceptance Inspection Form will serve as the certificate of compliance ASME and contract requirements.

## 2. ELEVATOR LOCATIONS AND TRAFFIC STUDY REQUIREMENTS

- A. The size and number of elevators required for a building depends upon the function of the building, size, layout, and the physical location and grouping of elevators.
- B. Locate elevators to serve all floors that require service, including the basement, and sub-basement. Elevators shall not stop at interstitial floors as elevator access to the interstitial space is not allowed per VHA guidelines and the VA Fire Protection Design Manual. Avoid placing elevators or dumbwaiters over occupied spaces as this will require counterweight safeties and reinforced pits.
- C. Where groups of elevators serving identical floors are required in two or more locations for the purpose of providing reasonable convenience of use, the elevators shall provide a minimum carrying capacity of not less than 120 percent of the maximum traffic peak to allow for migration between the groups.
- D. If one elevator meets the traffic requirements, provide two (2) elevators in all buildings to ensure continuity of service where patient transportation is essential, including Parking Garages. If additional patient transport elevators are within approximately 100 feet and serve the same landings a second elevator may not be required.
- E. All multi-level parking facilities, regardless of user, shall include a minimum of two passenger elevators. Elevators and adjacent stairs should be located in the logical pedestrian path, between the parking area and the medical center entrance. Where possible, stairs should be placed in a more prominent and visible location than elevators to encourage persons without disabilities to use stairs. Depending on the size of the parking facility and the presence of oversized vehicles within it, it is desirable to locate



Handicap spaces, adjacent to the elevators. The number of elevators provided will depend on the travel patterns of the users of the parking facility. PARKING STRUCTURE DESIGN SECTION 7-15 Parking Design Manual rev 8/1/2014 April 2013 Parking structure elevator design and specifications shall be in conformance with VA Transport System (Elevators) Design Manual. Note that this manual prohibits the specification of proprietary elevator equipment and tools. ADA/VA Barrier Free Design Standard PG -18-13 elevators must be provided in all installations. High-capacity elevators should be specified since these elevators will be located in an outdoor, exposed environment. Other design considerations include the following:

- 1) Provide traction elevators, with stops at all levels of parking structures. Overhead machine rooms shall have HVAC, as required by the Elevator Code and Elevator Manufacturers.
  - 2) Provide glass-backed cabs and hoist ways, where applicable. Provide HVAC in each elevator where required by code.
  - 3) Provide stainless steel radius frames and doors at all lobbies. Interior finishes shall include stainless steel walls, vandal-resistance lighting, and rubber flooring.
  - 4) Door operators shall be closed loop.
  - 5) Traveling cables should include capabilities for telephone and CCTV (2 coaxial cables required).
  - 6) Coordinate call buttons with floor identification for parking levels.
  - 7) If required, the fire alarm panel shall be located in the first floor lobby.
- F. Elevators shall be grouped in banks of adjacent elevators or banks of elevators facing each other. Do not exceed three (3) service elevators in-line, three (3) passenger elevators in-line, and not more than six (6) cars in a group of three (3) facing three (3). The lobby width between two banks of passenger elevators shall not be less than 3.66 m (12 ft). Service elevator lobbies shall not be less than 4.27 m (14 ft).
- G. The maximum walking distance from patient/visitor elevators to the most distance check-in area or rest area with seating should not exceed 45.75 m (150 ft). Elevators for patient transport, hospital services, and staff the maximum walking distance from elevators to the entry door of the most distant patient room should not exceed 76.25 m (250 ft), unless there is adverse impact to operational functionality or elevator locations. Paths of travel with inclines will reduce the total allowable travel distance. The Project Delivery and Design Support Teams, in coordination with the A/E team, must evaluate the proposed elevator placement to determine if proposed travel distances from elevators to healthcare delivery services and administrative areas are acceptable based upon the mission, population served, and operational concepts. The placement of elevators serving Mental Health Inpatient Units shall not be located within the confines of the unit for security and safety concerns. These factors should be weighed along with the advantages of locating elevators near the center of the building and the advantage of elevator clustering. Decentralized elevators should be planned to include at least two



(2) elevators and maintain an acceptable average interval approximately less than <50 seconds.

H. Estimating the number of elevators required:

- 1) The criteria recommended for service assumes an understanding of several elevator design terms and concepts. The adequacy of elevator service is related to the length of time passengers wait for service and the ability of the elevator system to handle people and equipment as they require service. Standards for the comparison and evaluation of these two basic measures of elevator service have been developed. They are termed AVERAGE INTERVAL and HANDLING CAPACITY.
- 2) Average interval is the “quality” measure and is defined as the elapsed time in seconds between elevator departures from a terminal floor, averaged over a specific time period. Average interval is not a direct measure of how long prospective passengers wait for service. However, it is a value that can be calculated and verified relatively easily. The accuracy of such calculations has been verified by countless tests. Such tests indicate that average passenger waiting time (APWT) for service at a typical intermediate floor approximates 65% to 80% of the average interval during heavy two-way traffic periods.
- 3) The “quantity” measure of elevator service is called handling capacity. This is defined as the number of persons and equipment that can be transported by the elevator system in each length of time. Average interval and handling capacity must be measured or calculated for the same designated time period to be meaningful. Handling capacity measurements shall always be based on the space taken by the various using population such as ambulatory people, wheelchairs, beds, carts, etc.
- 4) The building elevator population is the total number of persons and equipment that will require the use of automated vertical transport (elevators) during their stay in the building. Building occupants that use the stairs would not be included in the elevator population. Traffic studies shall detail the calculations that arrive at the populations used.
- 5) The anticipated population figures shall be provided by the Department of Veterans Affairs to assist in the system design. However, in all cases, the vertical transportation requirements shall be planned for the total design occupancy population rather than a forecast of initial occupancy.
- 6) Maximum traffic peak is the maximum percentage of the total population on the floors served by the elevators that must be handled during the peak five (5) minute period. The maximum traffic peak will vary with the type of functional areas and special conditions applicable to the facility. In general, analysis should consider visitor arrival and departures, staff changes, patient transport/staff/service and material movement. The maximum traffic peak shall be considered as being both 2-way and 1-way peaks based on elevator loading at the lower main terminal, or terminals, local discharge of passengers on the up trip, inter-floor travel and local passenger pickup on the return trip, and discharge at the lower main terminal.



- 7) Traffic studies shall be based on the requirements in PG-18-3 topic 18 and shall be accomplished individually for each elevator group except for specialty elevators that have obvious low traffic volumes such as an elevator that may be required in an industrial or storage area of a Central Utility Plant (CUP) used for moving occasional traffic required for servicing equipment or moving bulk storage.
- 8) Elevator Performance Tables, criteria for acceptable elevator performance shall be based on the following:

**PASSENGER ELEVATORS OVER THE PEAK 5 MINUTES**

<b>Building Type</b>	<b>Average Interval Required</b>	<b>Minimum Handling Capacity</b>
Hospital - Medical Center	Under 35 seconds	15% of the calculated building elevator population for the zones serviced (plus 20% migration for multiple elevator groups).
Outpatient Clinic	Under 40 seconds	15% of the calculated building elevator population for the zones serviced (plus 10% migration for multiple elevator groups).
Office Buildings	Under 45 Seconds	12% of the calculated building population.
Parking Garage	Under 45 Seconds	110 % of the calculated elevator population of the zones serviced.

**PATIENT and MATERIALS HANDLING SERVICE ELEVATORS OVER THE PEAK 5 MINUTES**

<b>Building Type</b>	<b>Average Interval Required</b>	<b>Handling Capacity</b>
Hospital - Medical Center	Under 40 seconds	15% of the calculated elevator population for the zones serviced (plus migration).
Outpatient Clinic	Under 45 seconds	15% of the calculated elevator population for the zones serviced (plus migration).

**PATIENT SERVICE and PATIENT EQUIPMENT ONLY SERVICE ELEVATORS OVER THE PEAK 5 MINUTES**

<b>Building Type</b>	<b>Average Interval Required</b>	<b>Handling Capacity</b>
Hospital - Medical Center	Under 40 seconds	115% of the calculated traffic.
Outpatient Clinic	Under 45 seconds	110% of the calculated traffic.



### 3. ELEVATOR TYPE, SIZE, AND CAPACITY

- A. Passenger elevators are used to transport the public, hospital staff, ambulatory, and mobility impaired patients that may use a wheelchair, scooter, or walker, etc. **Elevator sizes shall be determined by the area required for the intended use and by load weight where applicable.**
- B. Hospital service elevators are used to transport patients, staff, carts, and equipment. Patients may be in wheelchairs, beds, and gurneys.
- C. Combination passenger and service elevators may be installed where combined use is possible without interfering with normal activities in the healthcare facility. Avoid mixing patient transport with any other traffic.
- D. Elevators for limited special use are economically undesirable and shall not be specified unless they can be fully justified. The use of slow speed elevators shall be considered and separated from other traffic if required for mortuary use or the transport of animals.
- E. Passenger elevators with center opening doors shall be Class “A” loading as a minimum requirement. Service elevators with center opening doors or side sliding doors shall be Class “C3” loading as a minimum requirement. Freight elevators with vertical by-parting doors shall be Class “C1” loading.
- F. Maximum size and weight of electric powered equipment, carts, portable medical, and X-ray equipment shall be determined before selecting elevator size and capacity.
- G. Elevator capacity and platform design for non-healthcare facilities:
  - 1) Parking Garages shall be considered part of the Healthcare Facility and shall have minimum 4,000 lb capacity elevators.
  - 2) Elevator sizes may vary for non-healthcare facilities. Minimum size shall be 1125 kg (2500 lb) capacity to meet the requirements of PG-18-13 with 42-inch-wide center opening doors.
- H. Elevator capacity and platform design for healthcare facilities:
  - 1) Passenger elevators, (wider than deep) with a minimum 48 inches wide X 84 inches high center opening doors, shall be a minimum 4,000 lb (1818 kg) capacity with 42.2 sq ft (3.92 sq m) inside net platform area. Class “A” Loading.
  - 2) Passenger elevators (deeper than wide), minimum 48 inches wide X 84 inches high two speed side opening or center opening doors, shall be a minimum 4,000 lb (1818 kg) capacity with 42.2 sq ft (3.92 sq m) inside net platform area. Class “A” Loading.
  - 3) Patient Transport/Material Handling elevators, (deeper than wide) minimum 54 inches wide X 84 inches high center opening doors, shall be a minimum 5,000 lb (2250 kg) capacity with 50 sq ft (4.65 sq m) inside net platform area. The elevator car is sized to accommodate a patient bed with attendants and equipment. Larger elevator cars may also be needed for specialized hospitals or services, (heart





hospital, trauma service , surgery service, orthopedic service). Consider 6,000 lb. and larger elevators for facilities that require three (3) or more attendants and possibly equipment to accompany patient transports. Class “C3” Loading.

- 4) Bariatric elevators, (deeper than wide) minimum 54 inches wide X 84 inches high center opening doors, shall be a minimum 6,000 lb (2727kg) capacity with 57.7 sq ft (5.36 sq m) inside net platform area. Class “C3” Loading.
  - 5) Dedicated patient assist/trauma elevators when required are intended for patient transport from Critical Care Areas, Emergency Room (ER) trauma rooms to the Operating Rooms (OR). Hospitals requiring this service shall have an elevator(s) with a minimum 8,000 lb. capacity and 72 inches wide X 84 inches high center opening doors capable of carrying and responding to the transport of Trauma patients. It shall be conveniently placed for use between the Emergency Department, Heliport if provide, and Surgical Suite. Adjacencies and department locations shall provide for these transports to be completed within 90 seconds of horizontal transport. Special elevator controls shall ensure that the time to call, load and ride to the Surgical floor does not exceed 75 seconds. Advanced hall calls from remote locations shall be used when needed to meet these times. Class “C3” Loading.
  - 6) Freight elevators with vertical by-parting doors are not for passengers, only freight and freight handlers, shall be sized to handle the intended service: laundry, trash removal, dietary, etc. Class “C1” Loading.
  - 7) Automated Guided Vehicles (AGV) Elevators shall be 4,500 lb (2045 kg) capacity minimum with 46.2 sq ft (4.16 sq m) inside net platform area. Class “C1” Loading. Elevators shall have front and rear center opening doors, minimum 48 inches wide X 84 inches high. Elevators shall be equipped with inside car operating controls the same as a standard service elevator. If the AGV System fails transporter staff will be able to load carts manually with space inside for staff and carts.
- I. Traction elevators:
- 1) Overhead geared or gearless traction machines for elevators in buildings with a minimum rise of 12.2 m (40 ft) or more. The placing of traction machines in basement machine rooms or in machine rooms adjacent to the hoistway shall be limited to conditions that do not accommodate the installation of overhead machines.
  - 2) Utilize minimum .50"x8x19 or .50"x8x25 preformed traction steel hoist ropes or metric equivalent.
  - 3) All traction elevators shall have a device, direct acting on the suspension means, to prevent ascending over speed and unintended motion away from the landing, including loss of traction.
- J. Hydraulic elevator:
- 1) Specify oil hydraulic direct plunger elevators for up to four stops, 12.2 m (40 ft) with a rated speed of 0.63 m/s (125 fpm). Holeless plungers, maximum two (2) stages,





will be considered for difficult site conditions. Buildings that have basements or penthouses with limited access (no patients or public) that are more than four (4) stops, may use hydraulic elevators as a cost saving instead of using traction elevators.

- 2) Electronic Motor Starter shall be used on hydraulic elevators. Do not use Wye-Delta or Across the Line starters.
- 3) Locate down overspeed shut-off valve next to the cylinder head.
- 4) Manual shut-off valves in the oil line shall be provided in the pit and machine room.
- 5) Locate oil return scavenger pump in the elevator pit.

#### 4. ELEVATOR ENCLOSURE

- A. Elevator car enclosures shall be front or front and rear opening and detailed on the architectural drawings.
- B. Enclosure shall have a minimum canopy height inside the cab of 8ft (2.44 m).
- C. Canopy constructed of not less than 12-gauge steel. Walls shall be not less than 14-gauge steel.
- D. Front return panel(s), entrance columns, entrance transom shall be 14-gauge stainless steel full height of car.
- E. Service elevators: Side and rear walls of service elevators, up to the center line of the top handrail, shall be covered with stainless steel. Side and rear walls to the ceiling may be covered with high pressure plastic laminate, stainless steel applied directly to the cab walls or raised panels.
- F. Passenger elevators: Side and rear wall may use raised panels cover in materials suitable for use in elevators.
- G. Car door(s) shall be reinforced two panels steel construction covered with stainless steel on the inside surface wrapped around the leading edge.

#### 5. DOORS AND ENTRANCES

- A. Provide power door operation for all elevators.
  - 1) Passenger and Service doors shall be capable of opening doors at the rate of 0.75 m/s (2.5 fps), with actual speed being adjusted to meet requirements of the specific installation. Freight doors shall open at 0.3m/s (1 fps).
  - 2) Closing speed for all elevator doors shall be 0.3 m/s (1 fps). All power operated doors shall be equipped with an automatic reopening device for passenger protection. In healthcare facilities do not activate door nudging. Use audio voice announcement, "please stand clear of the doors", and activate the nudging buzzer.



- B. Entrances for Passenger, Service and Freight Elevators:
  - 1) Doors shall be center opening for passenger elevators and center or side opening for service elevators in healthcare facilities. Hoistway doors shall be reinforced, two panel construction, with stainless steel on the outside surface, wrapped around the leading edges. Use only center opening doors for elevators that require three (3) or more attendants and possibly equipment to accompany patient transport.
  - 2) Curved hoistway entrance side jambs shall be 3.5" radius for passenger and service elevators in healthcare facilities.
- C. Freight elevator vertical sliding hoistway bi-parting doors and car gate shall have automatic power operation. Opening size determined by facilities function.
- D. Solid grouting of all types of entrance jambs, headers, and sills is required.

## 6. OPERATING FIXTURES

- A. All terminology and tactile symbols on the faceplate shall be on square or rectangular plates recessed into the faceplate with its surface flush with the surface of the faceplate. Use 6 mm (.25 in.) letters to identify all devices in the faceplate. The tactile symbols with contrasting background shall be 0.5 in. high raised .030 inch on the plate. Surface mounted plates are not acceptable. Each button shall contain an integral registration LED white light which shall illuminate upon registration of a call and shall extinguish when that call is answered.
- B. Round car call and hall call push buttons, minimum diameter of 1 in., and LED white illuminated. **Car call buttons shall be legibly and indelibly identified by a floor number and/or letter not less than .50 inches high in the face of the call button. The direction of each hall button shall be legibly and indelibly identified by arrows not less than .50 inches high in the face of each button.**
- C. Main Car Operating Panel shall be a one-piece front faceplate with edges beveled minimum of 15 degrees, swing return, or tilt panel shall have the firefighter's service panel recessed into the upper section and the service operation panel recessed into the lower section. Doors shall have concealed hinges, be in the same front plane as the faceplate and fitted with cylinder type key operated locks. Secure the faceplate with stainless steel tamperproof screws.
- D. Auxiliary Car Operating Panel in healthcare facilities shall be in the front return panel opposite the main car operating panel, rear return panel (front and rear doors), or side wall of the elevator between the handrails immediately adjacent to the front entrance column strike jamb. The auxiliary car operating panel shall contain only those controls essential to passenger (public) operation. The auxiliary car operating panel faceplate shall match the main car operating panel faceplate in material and general design. Secure the faceplate with stainless steel tamperproof screws.



## E. Communication:

- 1) Provide a complete, ADA compliant, auto dial communication system that is compatible with the VAMC's telephone system. Two-way communication device shall be in full compliance with ASME A17.1 Rule 2.27.1.1 (2019) or later editions. Conduit and wire shall be provided by the VA from the elevator machine room to a 24-hour monitoring location.
- 2) Provide digitized audio voice system. Audio voice shall announce floor designations, direction of travel, and other announcements as required. The voice announcement system shall comply with ADA requirements for audible car position indicators. The voice announcer shall have two separate volume controls, one for the floor designations and direction of travel, and another for special announcements. The voice announcer shall have a full range loudspeaker, located on top of the cab. The audio voice unit shall contain the number of ports necessary to accommodate the number of floors, direction messages, and special announcements. Install voice announcer per manufacturer's recommendations and instructions. The voice system shall be the product of a manufacturer of established reputation. Provide manufacturer literature and list of voice messages.

## F. Corridor Operating Devices:

- 1) Fabricate faceplates for elevator operating and signal devices from not less than 3 mm (.125 in.) thick flat stainless steel with all edges beveled minimum of 15 degrees.
- 2) Corridor push button faceplates shall be sized to accommodate corridor pictograph on faceplate. The centerline of the landing push buttons shall be 42 in. above the corridor floor. Elevator Corridor Call Station Pictograph shall be engraved in the faceplate.
- 3) The direction of each button shall be legibly and indelibly identified by arrows not less than .50 in. high in the face of each button. Provide a corresponding Braille plate on the left side of each button.
- 4) Provide emergency power indicator light, medical emergency card reader/key switch and indicator light, fire service recall key switch, indicator light, and fire recall instruction, communication failure light, audible enunciator, and reset key switch in a fixture at the designated main floor.

## G. Digital Combination Corridor Arrival Lantern/Position Indicator:

- 1) Provide alpha-numeric digital position indicators between arrival lanterns at all floors in healthcare buildings. Numerals shall be not less than 2.5 in. high with direction arrows. Cover plates shall be removable for re-lamping. The appropriate direction arrow shall be illuminated during entire travel of car in corresponding direction.
- 2) Provide alpha-numeric digital position indicators between arrival lanterns only at the main and alternate fire recall floors in non-healthcare buildings.



- 3) Provide each terminal landing with "UP" or "DOWN", minimum 2.5 in. high digital arrow lanterns and each intermediate landing with "UP" and "DOWN" digital arrow lanterns. Each lens shall be LED illuminated of proper intensity, so shielded to illuminate individual lens only. The lenses in each lantern shall be illuminated green to indicate "UP" travel and red to indicate "DOWN" travel. Lanterns shall signal in advance of car arrival at the landing indicating the direction of travel. Corridor lanterns shall not be illuminated when a car passes a floor without stopping. Each lantern shall be equipped with a audible electronic chime which shall sound once for "UPWARD" bound car and twice for "DOWNWARD" bound car. Audible signal shall not sound when a car passes the floor without stopping. Provide adjustable sound level on audible signal. **Car riding lanterns are not acceptable.**

## 7. CONTROL SYSTEMS

- A. Provide a microprocessor system with absolute position/speed feedback to control dispatching, signal functions, door operation, and hoist/pump motor control. Complete details of the components and printed circuit boards, together with a complete operational description, shall be submitted for approval. Add Regenerative Drive when determined to be life cycle cost effective for the VA facility.
- B. Controller manufacturer shall provide factory training, engineering and technical support, including all manuals, wiring diagrams, and tools necessary for adjusting, maintaining, repairing, and testing of equipment for use by the VA's designated Elevator Maintenance Service Provider. The materials provided become the property of the VA.
- C. Microprocessor dispatching system shall evaluate building traffic demand including number of elevators in service, hall calls, car calls, elevator position, direction of travel, load in elevator, door status, and select an elevator to answer hall calls for least possible passenger wait times.
- D. Car lights and fan in the elevator may shut off when elevator is idle. Provide power thru a failsafe relay that is energized to turn off lights and fan. Power to the lights and outlets on top and bottom of elevator shall not be interrupted.

## 8. ELEVATOR MACHINE ROOMS

- A. Elevator machine rooms shall be sized to accommodate the elevator machine, controller, and other related equipment. It shall be possible to remove major equipment components of each elevator for repair without dismantling components of an adjacent elevator.

## 9. ELEVATOR HOISTWAYS

- A. The interior face of the hoistway walls shall have a smooth, flush, and non-dust producing surface. Exposed spray-on fire proofing shall not be used in the elevator hoistway.



## 10. ELEVATOR PITS

- A. Provide two stop switches in the pit, 48 in. above the bottom landing at the top of the pit ladder and 48 in. above the pit floor adjacent to the pit ladder.

## 11. FUTURE VERTICAL EXPANSION OF ELEVATORS AND MATERIAL TRANSPORT SYSTEMS

- A. Locate elevators, dumbwaiters, and transport systems, requiring future vertical and horizontal expansion, to serve functions and activities in original building and proposed future expansion.
- B. Select types of vertical and horizontal transport designs on the basis of the kind and volume of original and projected future traffic.
- C. Analyze traffic during preliminary design stage to determine the economic feasibility of originally installing vertical and horizontal transport systems having future additional capacity. If that is not feasible, provide spaces for future hoistways. Provide future hoistway space with knockout floor slabs to allow that floor space be utilized until the future expansion takes place.
- D. When the designed equipment is overhead traction type, design the machine room area and the machine beams to be removable. This facilitates machine room relocation and extension of the hoistway. For future expansion from Hydraulic to Traction elevator, Basement Traction would allow the use of the same Machine Room attached to Hoistway.
- E. When the original designed equipment is hydraulic and the building is designed for future vertical expansion, structure the hoistway for future overhead or basement electric traction elevator. Pit depth for a hydraulic elevator is 48", minimum pit depth for a traction elevator is 69" for 200 fpm. Verify required depth.

## 12. ELECTRICAL REQUIREMENTS

- A. Each elevator shall be provided with a separate disconnect and surge suppressor in the respective machine room located adjacent to the entry. The supply shall terminate at the respective elevator controller. The elevator power supply shall be a dedicated main feeder utilizing the shortest practical run and continuous ground conductor.
- B. Emergency power supply shall have the capacity to operate a minimum of one elevator per group in healthcare facilities. (Electrical Design Manual 4.6.1.1 Life Safety Branch)
  - 1) If emergency generator is not available, traction elevators shall be provided with an emergency power system that will run the elevator to the nearest floor and open the doors.
  - 2) If emergency generator is not available, hydraulic elevators shall be provided with an emergency lowering system to lower the elevator to the bottom floor, open the doors.
- C. Fire Alarm Initiating Devices shall be installed in elevator lobbies, top of hoistways, and elevator machine rooms as required.



- D. Heat Detectors and Sprinklers shall meet the requirements of IBC, NFPA 13, and ASME A17.1.
- E. Provide a circuit breaker panel or disconnect switches lockable in the off position in each machine room for emergency power circuit for car lights, fan and alarm, circuit for the machine room GFCI receptacles, circuit for the hoistway lights, circuit for hoistway GFCI receptacles, and circuit for the scavenger pump in the pit for hydraulic elevator.
  - 1) Hoistway lights shall be stacked vertically in the rear of the hoistway near the corner for a single elevator or on the back wall between the divider beams of a duplex or triplex installation. The extreme top and bottom fixtures shall be mounted to illuminate the pit area when the car is at the bottom landing and the car top when the car is at the top landing. Provide three-way light switches at the top of the pit ladder and five feet above the top terminal landing at the inside front wall near the hall button box.

### 13. DRAWINGS

- A. Separate architectural drawings shall be prepared for the transport systems. Elevator drawings shall show electrical services, materials, sizes, details, space conditions, etc., of hoistway enclosures, pits, cabs, entrances, machine rooms, and other features. The elevator drawings shall be coordinated with the other architectural, structural, mechanical, and electrical drawings to ensure that proper space conditions and other requirements have been provided.
- B. The spaces shall be designed to accommodate the elevator equipment specified.
- C. Architectural drawings shall show reactions at point of elevator machine beams and buffer supports. Indicate impact loads.

