

**STATE OF NEVADA
OSHA MECHANICAL UNIT**

**Request for an Approved Exemption
In Accordance with (NAC 455C.116 or 455C.448)**

Phone: (702) 486-9054 or (775) 824-4650 Fax: (702) 486-9176 or (775) 688-1664

Date Exemption Requested: _____ Requested by: _____

Contractor, Installer or Owner of Equipment: _____

Location (address): _____

City, State and Zip code: _____

Requested for: _____ Elevator ID No.: _____ Boiler ID No.: _____

Conditions:

Reason:

Approved

Yes No Safety Supervisor: _____ Date: _____
 Yes No Safety Manager (When required): _____ Date: _____
 Yes No CAO (When required): _____ Date: _____