

Registering a Conveyance Device with the Office of State Fire Marshal

The registration of a conveyance device is performed online and can be initiated here: [OSFM Conveyance Device Registration](#).

The corresponding Registration Portal is comprised of four sections, each is explained below.

1. Owner of Conveyance Device - Required

<input type="checkbox"/> OWNER OF CONVEYANCE DEVICE				
NAME OF OWNER:		OFFICE ADDRESS:		
<input type="text"/>		<input type="text"/>		
TELEPHONE:	EMAIL ADDRESS:	CITY:	STATE:	ZIP:
<input type="text"/>	<input type="text"/>	<input type="text"/>	Loui ▾	<input type="text"/>

This section identifies the owner of the conveyance device, this owner:

- is the person or entity who owns the structure,
- may have a business address that is in a different location from where the conveyance devices are installed, and
- will receive notices regarding registration and inspections.

To complete this mandatory section:

- First, check the box next to “OWNER OF CONVEYANCE DEVICE”
- Then enter the owner’s name, full office address, and contact information to include telephone # and email address.

2. Owner Representative Registering Conveyance Device – Optional, but encouraged

<input type="checkbox"/> OWNER REPRESENTATIVE OF CONVEYANCE DEVICE				
NAME OF PERSON REGISTERING THE DEVICE:		OFFICE ADDRESS:		
<input type="text"/>		<input type="text"/>		
TELEPHONE:	EMAIL ADDRESS:	CITY:	STATE:	ZIP:
<input type="text"/>	<input type="text"/>	<input type="text"/>	Loui ▾	<input type="text"/>

This section identifies the owner’s representative and the person who would be the main point of contact for the device(s). The point of contact is:

- often a building superintendent or facility manager,
- typically located in the same facility or complex where the conveyance devices are located, and
- will receive notices regarding registration and inspections.

To complete this optional section

- First, check the box next to “OWNER REPRESENTATIVE OF CONVEYANCE DEVICE”
- Then enter the representative’s name, full office address, and contact information to include telephone # and email address.

3. Entity/Individual Registering the Device - Required

Entity/Individual registering device must select one of the following:		<input type="checkbox"/> LICENSED FIRM (Installing/Maintenance/Inspection)		<input type="checkbox"/> OWNER MANAGED	
LICENSED FIRM:		FIRM ADDRESS:		OSFM LIC:	EXP DATE: mm/dd/yyyy <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TELEPHONE:	EMAIL ADDRESS:	CITY:	STATE:	ZIP:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
NAME OF MECHANIC/INSPECTOR SERVICING THE DEVICE:		ADDRESS:		OSFM LIC:	EXP DATE: mm/dd/yyyy <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TELEPHONE:	EMAIL ADDRESS:	CITY:	STATE:	ZIP:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

This section identifies who is actually registering the devices and additional information related to the firm servicing the device or which performed the installation.

- A licensed Installing/Maintenance/Inspection firm should be selected when the firm has been authorized or directed by the owner to register the conveyance device.
- Owner managed should be selected when the owner, or owner’s representative, is managing the conveyance device(s).

To complete this section for a LICENSED FIRM

- First, check the box next to LICENSED FIRM.
- Then enter licensed firms name, office address, contact information to include telephone # and email address, their OSFM license#, and expiration date.
- Then, provide the name and associated information for the firms mechanic or inspector that last provided services.
- Notifications regarding the registration and inspection of a device will include the licensed firm.

To complete this section for a OWNER MANAGED

- Optional information, while not required, is encouraged. The OSFM requests that owners, or owner’s representatives, complete any information available regarding the installing firm, regardless of when the conveyance device was installed. Available data may be entered in the space for licensed firm.
- Notifications regarding registration and inspections for an owner managed device(s) will be made only to the owner and owner’s representative.

4. Device Registration – Required

<input type="checkbox"/> Subject to five (5) year load test				
WHERE CONVEYANCE DEVICE IS LOCATED:	ADDRESS OF STRUCTURE:	CITY:	Speed	Device Type:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	OTHER <input type="text"/>
MANUFACTURER:	SERIAL NUMBER:	LAST ANNUAL INSPECTION	DATE INSTALLED (IF KNOWN):	RATED LOAD:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

This section is unique to each registered conveyance device and must be accurately completed; the information submitted establishes the devices inspection cycle and the need for a five-year load test where required.

To complete this section for a DEVICE REGISTRATION(S)

- The 5-year load test box should only be selected if the device being registered is an electric (traction) elevator.
 - Although the load test requirement does not take effect in July1, 2028, the OSFM would like to begin tracking the devices subject to this requirement.
 - These periodic tests are required pursuant to R.S. 40:1646(2)(b), and in accordance with ASME A17.1-2019, Appendix N, and are only applicable to electric (traction) elevators.

- Complete the required fields as follows:
 - Location within structure to included a descriptor that identifies the specific (i.e. Westside Lobby – Car 2, loading dock, etc.)
 - Address of structure shall include all address fields.
 - Speed shall reflect the devices rated feet per minute (FPM).
 - Device type shall be selected from the available drop down menu.
 - Manufacturer shall be reflected based on available information.
 - Serial number refers to the manufacturer’s assigned number.
 - Date installed shall be entered based on available information. Where the date is unknown the field may be left blank.
 - Rate load shall reflect the devices capacity in pounds (lbs.).

- Last Annual Inspection Date

<p>Important Notice</p> <p>This field is critical as it establishes future inspection cycles.</p> <p>Where an annual inspection date is submitted within the 2025 calendar year, the registrant must ensure that the passing inspection is documented and was completed by a licensed inspector. <u>The OSFM may request supporting documentation.</u></p>

- Enter the date of the last annual inspection. Where no passing inspection is available the field shall be left blank. The completion of this field is date dependent and will have the following effect:

Passing Inspection within the 2025 calendar year

Where a conveyance device passed an annual, or new installation inspection, within the 2025 calendar year, the first annual inspection under this chapter shall be completed within the same calendar month of 2026. For example a passing inspection conducted on July 15, 2025, would result in the next annual inspection due date being set for July of 2026, and each year thereafter.

No Passing Inspection within the 2025 calendar year

Where a conveyance device is registered that has not passed an annual or new installation inspection within the 2025 calendar year; an annual inspection shall be performed no later than April 30, 2026, which is within 120 days from when the device is required to be registered. The calendar month in which the device's annual inspection occurs will establish the month in the following year where the annual inspection is due.