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| http://inside.lni.wa.gov/Director/resources/GraphicIdentity/BlackPrint.png | **Elevator Rule Development Form**  **Chapter 296-96 WAC Elevator Rules** |

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| **Proposal Number:** |  |

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| **How to Submit this Form:** | | |
| **Mail requests to:**  Department of Labor & Industries  Elevator Program  PO Box 44480  Olympia Wa 98504-4800 | **Email requests to:**  [ElevatorSect@Lni.wa.gov](mailto:ElevatorSect@Lni.wa.gov) | **Fax requests to:**  360-902-6132 |

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| **Submitter Information** | | | |
| Name/Company Name | | Date | |
| Email Address | Phone Number | Fax Number | |
| Street Address | City | State | Zip Code |

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| 1. **Proposal (*Please provide the WAC rule number or National Code Section and include the new or revised language or language for deletion. Use underscore to denote the language to be inserted and ~~strike through~~ to denote language to be deleted.*)** |

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| 1. **Statement of Problem and Justification (*Please provide a brief explanation and justification statement for this proposal.)*** |
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