

LIFT2GO SITE ASSESSMENT FORM

Use this form to record the key information needed to determine the suitability of Lift2Go for a given location and user. Refer to the appropriate sections of the ***Installation and Maintenance Manual*** to determine if the Lift2Go is suitable for this application.

Installation Location and Contact Information

Date of assessment	
Prepared by	
Customer contact name	
Customer phone number	
Customer email	
Address for installation & location (eg front steps)	
Expected start date/time	
Expected end date/time	

Mobility Device Information

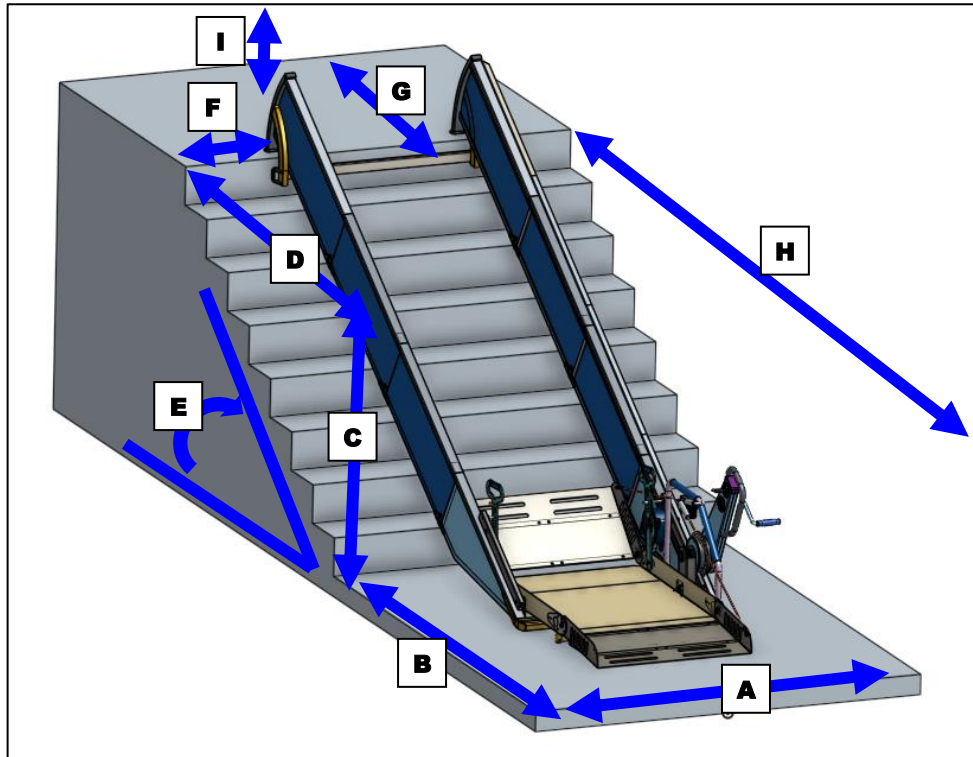
See chart in the ***Installation and Maintenance Manual*** to determine if device is compatible

Mobility device width (units)	
Mobility device length (units)	
<u>Total</u> weight of mobility device and user (units)	

Accessible Path of Travel to Lift2Go Location

Path of travel to Lift2Go location is appropriate (width, slope, surface lighting, snow removal)
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Key Location Measurements



ID	Description	Value (units)
A	Width of stairs	
B	Clear approach distance from stairs	
C	Overall stair rise	
D	Overall stair run	
E	Overall slope	
F	Distance to stair side	
G	Upper level approach distance	
H	Overall horizontal distance required from porch	
I	Threshold step (height, width, distance from stairs)	
Note photograph and measure other factors affecting access		

See maximums, minimums and comments in *Installation and Maintenance Manual*.

Self-operating User Requirements

User is able to apply 5-9 kg force (12-20 lb) for 30 seconds	YES / NO
User can reach down far enough to secure ramps and recover handles if dropped	YES / NO
Describe self-operating user's emergency plan in case of mechanical failure	

Attendant-operating User Requirements

User is able to apply 5-9 kg force (12-20 lb) for 30 seconds	YES / NO
User can reach down far enough to secure ramps	YES / NO