

Alberta Elevating Devices & Amusement Rides Safety Association

207, 8616 - 51 Avenue, Edmonton Alberta T6E 6E6

APPLICATION CERTIFICATE of OPERATION SUPPLEMENTARY FORM for NEW Inflated Amusement Device

PLEASE PRINT ALL INFORMATION

In accord with Alberta Regulation 286/2002 a Certificate of Operation must be in effect for amusement rides that are operated in Alberta.

1. This application is for a: New Inflated Device _____ Portable Device _____ Permanently Located Devices _____

2. Applicant or Agent:
(Company Name, Street, City and Postal Code) _____

3. Site Address of Fixed Facility:
(Park or Facility Name, Street, City and Postal Code) _____

4. Fixed Site Owner or Agent:
(Owner/Company Name, Street, City, Postal Code and Person in Charge) _____

5. Fixed Site Design Engineer:
(Owner/Company Name, Street, City, Postal Code and Person in Charge) _____

6. Ride Owner:
(Company Name, Street, City, Postal Code and Person in Charge) _____

7. Owner's Name for Device: _____

8. Manufacturer's Name for Device: _____

9. Manufactured By: (Company Name) _____ Serial Number: _____

10. List all drawings and other documents submitted in support of this application here:
Submit at least 1 copy of each document. Include as a minimum, drawings showing general arrangement of device, flame spread rating of device, manufacturer's specifications for the device, manufacturer's instructions for erecting and dismantling the device, instructions for operating and maintaining the device, and safety instructions.

(Note: Attach Additional Information as Required)

11. APPLICANT'S SIGNATURE _____ PRINT NAME _____ DATE _____

Cashier Validation

Cheque #: _____ Amount: _____

Dated: _____ Received: _____ ZR/Inv. Number: _____