

ALBERTA ELEVATING DEVICES and AMUSEMENT RIDES SAFETY ASSOCIATION APPLICATION FOR CERTIFICATE OF OPERATION

Passenger Ropeways & Conveyors

Edmonton Office, #207, 8616 – 51 Avenue, Edmonton, AB T6E 6E6 Phone: (780) 448-0184 Fax: (780) 448-0237

This form is to be completed and signed by the owner or his/her designated representative

Please Print all Information

Part 1. Owner Information

Ski Area Name: _____

City: _____

Street: _____

Province: _____ Postal Code: _____

Telephone No.: _____ Fax No.: _____

Person in Charge: _____ Email Address: _____

Title: _____

I. New Lifts: For any new lifts being installed please complete the Application for Certificate of Construction and Major Alteration (EDA072/rev4/05) and forward it and other required documents with this application.

II. Altered Lifts:

III. Answer the following questions (check Yes, No or N/A for each question)

NOTE: Applicable clauses from CSA/ CSA Z98-07, Safety Code for Passenger Ropeways & Conveyors are noted after the following items for your convenience. For complete requirements refer to the Z98 Standard.

A. General

Yes	No	N/A	
_____	_____	_____	1. CAN/CSA-Z98S2-04 Passenger Ropeways & Conveyors Code on site
_____	_____	_____	2. Operations Manual on Site (Clause 11.4)
_____	_____	_____	3. Maintenance Procedures being followed (Clause 11.21)
_____	_____	_____	4. Operational Procedures and Rules are being followed (Clause 11.6)
_____	_____	_____	5. All directives previously issued by AEDARSA have been completed

B. Records

Yes	No	N/A	
_____	_____	_____	1. Maintenance Log on site and up to date (Clause 11.24)
_____	_____	_____	2. Daily Inspection Checklist in place and up to date (Clause 11.12.1)
_____	_____	_____	3. Operational Log on site and up to date (Clause 11.18)
_____	_____	_____	4. Wire Rope Log on site and up to date (Clause 11.32)

C. Personnel

Yes	No	N/A	
_____	_____	_____	1. Manual Evacuation Training Provided (Clause 11.16)
_____	_____	_____	2. Operating Personnel Training Provided (Clauses 11.2, 11.10.2, 11.11 and 11.36)
_____	_____	_____	3. Maintenance Personnel Training provided (Clause 11.2)

D. Signs & Notices

Yes	No	N/A	
_____	_____	_____	1. Safety Procedures Posted (Clause 11.19)
_____	_____	_____	2. Procedures for Unusual Occurrences Posted (Clause 11.10.1)
_____	_____	_____	3. Evacuation Procedures Posted (Clause 11.16.1)
_____	_____	_____	4. Brake Test Procedures Posted (Clause 11.23.6)

E. Tests and Documents (Chair lifts, Gondolas, Reversible Trams)

Yes	No	N/A	
_____	_____	_____	1. Routine Non Destructive Tests Up to Date for:
_____	_____	_____	(a) Haul Rope and/or Track Rope (Clause 11.27) note: new ropes must be tested within 12 months of installation)
_____	_____	_____	(a)(i) Visual examinations carried out (Clause 11.27.3) and Condition Satisfactory (Clause 11.29, 11.30, 11.31)
_____	_____	_____	(b) Chair/Gondola/Tram Cabin Hangers (Clause 11.35)
_____	_____	_____	(b)(i) Visual Inspections Conducted and Condition Satisfactory (Clause 11.35.2)
_____	_____	_____	(c) Rope Grips (Clause 11.35)
_____	_____	_____	(c)(i) Visual Inspections Conducted (Clause 11.35.2)
_____	_____	_____	2. N.D. Tests on Rope Sleeves and Sockets used or reused (Clause 11.27.4)
_____	_____	_____	2(a) Condition Satisfactory
_____	_____	_____	3. Five year load tests up to date (Clause 11.26) NOTE: If your answer is "no", attach details on which lifts are not up to date and your plans for completing required tests

F. Certificate on Site

Yes	No	N/A	
_____	_____	_____	1. Latest Haul Rope Splice (Clause 10.7 & 11.33) (Not required for rope tows)
_____	_____	_____	2. Rope Grips and Hangers Repaired (Clause 11.35.2)
_____	_____	_____	3. Rope Grips and Hangers Replaced (Clause 3.27.3 & 3.27.5.)
_____	_____	_____	4. Haul, Track Rope or Counterweight Replaced (Clause 10.6 & 11.22 manufacturer's test to destruction)
_____	_____	_____	5. Rope Sockets Replaced per Manufacturer's Instructions (Clause 11.27.5)

Explain each "No" answer (attach additional information as required).

IV. Owners Declaration

I, the undersigned, declare that the information provided in this application is true and correct.

Name (print)	Signature	Position/Title	Date
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