



General Contractor REQUEST FOR ACCEPTANCE INSPECTION Declaration

Requested Inspection Given to the Elevator Installer

Date: _____

Unit Installation Number(s): _____

Installation Building Name: _____

Installation Address: _____

Type of Device: _____

Please complete the following and give it to your elevator installer

The Elevating Device complies with the *Safety Codes Act* and the following Alberta regulations; *Elevating Devices Code, Alberta Building Code Electrical Code and Plumbing Code* and the items set-out in the **General Contractor Checklist EDA089/rev/2/14.**

Yes

No

If “No” explain why the installation doesn’t comply:

1.	
2.	
3.	
4.	
5.	
6.	

Name of General Contractor: _____

Telephone Number: _____ Fax Number: _____

Name & Title of Company Site Manager _____

Signature of Company Site Manager _____ Date: _____

ANY CANCELLATIONS OR RE-INSPECTIONS WILL BE SUBJECT TO ADDITIONAL FEES