

Alberta Elevating Devices and Amusement Rides Safety Association

APPLICATION FOR CERTIFICATE OF CONSTRUCTION AND MAJOR ALTERATION

ELEVATORS, ESCALATORS, DUMBWAITERS, MOVING WALKS, FREIGHT PLATFORM LIFTS
LIFTS FOR PERSONS WITH PHYSICAL DISABILITIES, PERSONNEL HOISTS, MANLIFTS

PLEASE PRINT ALL INFORMATION

All sections of this form must be completed (with correct information) to be processed.
(i.e. Initial inspections will not be scheduled if the application is not complete when submitted.)

AEDARSA Assigned E# _____

1. This application is for a certificate of: Construction <input type="checkbox"/> Major Alteration <input type="checkbox"/> (Check beside the type of application) NOTE: Use one application form for each conveyance		FEE See Note 1 Reverse Side for Fee Schedule
2. Applicant Name: _____ (Address, City, Postal Code) _____		
Contact Name: _____ Contact #: _____		
Email Address: _____		
3. Site Name _____ (Address, City, Postal Code) _____		
4. AGENT/OWNER _____ (Address, City, Postal Code) _____		
Contact Name: _____ Contact #: _____		
Email Address: _____		
5. Building General Contractor: _____ (Address, City, Postal Code) _____		
6. Class of Fixed Conveyance: _____ (See Note 2 Reverse Side)	7. Type of Fixed Conveyance: _____ (See Note 3 Reverse Side)	
8a. Floors: _____	8b. Openings: _____	8c. Capacity: _____ KG/LBS
9a. Known As: _____	9b. Location: _____	
10. Emerg. Power: Yes <input type="checkbox"/> No <input type="checkbox"/> Firefighters Emerg Op (FEO): Yes <input type="checkbox"/> No <input type="checkbox"/> FEO Required by Bldg Enforcing Authority: Yes <input type="checkbox"/> No <input type="checkbox"/>		
11. Manufactured By (Company Name): _____		Serial Number: _____
11a. List all professional engineers stamped and endorsed drawings and other documents (see 11b) submitted in support of this application: Submit at least 2 copies of each document. (1 will be retained for our records, the remainder returned to the submitters records) _____ Note: Attach Additional Information as Required		
11b. List all Certificates of Conformance issued by an ACEO/s in support of compliance using ASME-A17.7/CSA B44.7 as permitted by ASME 17.1/CSA B44 Section 1.2 Clause 1.2.1(b) or (c). Note: Conditions may be placed on the Certificates of Compliance by AEDARSA to ensure that field changes do not compromise the original design criteria and Certificate of Conformance. _____ Note: Attach Additional Information as Required		
12. Major Alteration: Describe the scope of the proposed alteration. Drawings and specifications submitted for major alteration may be limited to the scope of the alteration. _____ Note: Attach Additional Information as Required		
13. Indicate if this is a resubmission: YES <input type="checkbox"/> NO <input type="checkbox"/> If the equipment or its arrangement is changed after plans have been registered revised plans covering the changes must be resubmitted for acceptance. _____ Note: Attach Additional Information as Required		
14. Is the submission based on a previously issued Provincial Variance?: YES <input type="checkbox"/> NO <input type="checkbox"/> If YES what is the AMA Variance Number _____ Note: By signifying YES you are indicating the submission is designed in full compliance with the original granted variance and there are no design changes to that variance.		
15. ALBERTA PROFESSIONAL ENGINEER'S STATEMENT The code used for design, manufacture and installation of the fixed conveyance in this application is CSA Standard: _____ (See Note 4 on Reverse Side) This is to certify that the elevating device or major alteration to the elevating device in this application complies with the above referenced code. Signature: _____	16. ALBERTA PROFESSIONAL ENGINEER'S SEAL	
APPLICANT: FOR ADDITIONAL INFORMATION REGARDING FEES AND MAILING ADDRESS PLEASE REFER TO THE REVERSE SIDE OF THIS DOCUMENT		
APPLICANT'S SIGNATURE _____	PRINT NAME _____	DATE _____
DEPARTMENT USE ONLY		
Certificate issued: Yes <input type="checkbox"/> No <input type="checkbox"/> Variance granted: Yes <input type="checkbox"/> No <input type="checkbox"/> Conditions attached: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Application reviewed by _____		Date: _____
SCO # _____		
CHECK # _____	AMOUNT _____	

FOR YOUR INFORMATION

Note 1: The fee schedule for Certificates of Construction or Major Alteration is as follows:

TYPE OF DEVICE	FEE	GST	TOTAL FEE
a) passenger elevator, freight elevator or personnel hoist			
i) that serves 10 floors or fewer	\$200.00	\$10.00	\$210.00
ii) that serves more than 10 floors	\$400.00	\$20.00	\$420.00
b) freight platform lift	\$150.00	\$7.50	\$157.50
c) dumbwaiter	\$100.00	\$5.00	\$105.00
d) escalator	\$200.00	\$10.00	\$210.00
e) speedwalk or speedramp	\$200.00	\$10.00	\$210.00
f) manlift	\$200.00	\$10.00	\$210.00
g) inclined passenger lift	\$200.00	\$10.00	\$210.00
h) lifts for persons with physical disabilities	\$50.00	\$2.50	\$52.50

Note: The fee for a certificate of alteration with respect to a fixed conveyance is 50% of the fee set out for the applicable certificate of construction.

Note 2: Class of Fixed Conveyance(s)	Note 3: Type of Fixed Conveyance(s)
Passenger	1. Traction/ Traction LULA/ Traction MRL 2. Hydraulic/ Hydraulic LULA/ Roped Hydraulic 3. Drum
Freight	1. Traction/ Traction LULA/ Traction MRL 2. Hydraulic/ Hydraulic LULA/ Roped Hydraulic 3. Drum
Personnel Hoist	N/A
Freight Platform	1. Type A 2. Type B
Dumbwaiter	N/A
Escalator	N/A
Speedwalk	N/A
Speedramp	N/A
Manlift	1. Power Type 2. Belt Lift
Lifts for Persons with Physical Disabilities	1. Vertical enclosed 2. Vertical unenclosed 3. Stair Platform 4. Stair Chair

Note 4: Adopted Codes in Alberta are CSA Standards:
 (a) ASME A17.1-2013/CSA B44-13 Safety Code for Elevators, Escalators
 (b) CAN/CSA-B355-09 Lifts for Persons with Physical Disabilities
 (c) CSA/B311-02 (R2012) Safety Codes for Manlifts
 (d) CAN/CSA-Z185-M87 (R2011) Safety Code for Personnel Hoists

Note 5: Mailing Information:

AEDARSA ALBERTA ELEVATING DEVICES AND AMUSEMENT RIDES SAFETY ASSOCIATION	
EDMONTON OFFICE 104, 8616 - 51 Ave Edmonton, Alberta T6E 6E6	CALGARY OFFICE 209, 264 Midpark Way SE Calgary, Alberta T2X 1J6

NOTE 6: Make fees payable to:
AEDARSA (ALBERTA ELEVATING DEVICES and AMUSEMENT RIDES SAFETY ASSOCIATION)