

AEDARSA

SAFETY EXAMINATION CHECKLIST

Area Name _____
 Type of Lift _____ Known As _____ Year Installed _____
 Applicable Code Z98- _____ AEDARSA I.D. # S _____ Date Examination Completed _____

- Relevant clauses from the CSA Z98-19 Passenger Ropeways & Conveyors Code are included for reference purposes
- Foundations and all structural, mechanical and electrical components must be examined and maintained in a safe operating condition in accord with the code in force at the time the lift was installed

LEGEND: Enter S (for Satisfactory), NA (for Not Applicable to this lift), or X (for To Be Completed Before Operation) in the box to the right of each item
 Where date is required please enter numerically Year/Month/Day

A.	SCO	DRIVE TERMINAL	OWNER	D.	SCO	LOADING/UNLOADING AREAS	OWNER
Code		General		Code		General	
4.31.3	501	Disconnect Function & Condition		5.17 5.17.4	601	Loading Area	
4.32.1.5	502	Equipment & Terminal Grounding		5.17 5.17.4	602	Unloading Area	
4.15	503	Condition of Foundations		4.27.2	603	Passenger Control System, Loading	
12.9	504	Condition of Structure		4.27.3	604	Passenger Control System, Unloading	
12.9	505	Bullwheel Condition		5.17.2	615	Cabin Guides	
4.20.6	506	Guide Sheaves Condition		5.17.3	616	Carrier Stops	
4.20.9	507	Assembly Alignments				Operation	
4.26	508	Protection at Terminal Structure		12.4.1	611	Safety and Stop Switches Tested, Loading	
5.17.3	521	Condition/Carriage Buffer Set up		12.4.1	612	Safety and Stop Switches Tested, Unloading	
		Machine Room		5.19	613	Communications Systems Tested	
12.9	511	Drive Machinery Condition				Procedures	
4.26	512	Drive Machinery Guards		12.3.2	621	Lockout Procedure Posted	
4.25.3	514	Emergency Brake Condition		4.39.3.2	622	Evacuation/Auxiliary Drive Procedure Posted	
4.25.2	515	Service Brake Condition		13.10.1	623	Routine/Unusual Occurrences Procedure Posted	
12.13	516	Service Brake Torque Test		12.13	624	Brake Torque Test Procedure Posted	
				13.16	625	Manual Evacuation Procedure Posted	
12.13	518	Emergency Brake Torque Test		E.	SCO	LINE EQUIPMENT	OWNER
4.24.2	519	Condition Evacuation Drive(Standby)		Code		General	
4.24.6	520	Condition Auxiliary Drive		11.8.4	631	Haul Rope Condition (Visual)	
		Operation		11.8.3	632	Date of Last N.D.T. Haul Rope _____	
5.10.1.5	525	Service Brake: Stop Distance _____ m		11.11	633	Splice Condition (Visual)	
5.10.1.4	526	Emergency Brake: Stop Distance _____ m		11.8.3	617	Date of Last N.D.T. Track Rope	
4.16	526	Maximum Rated Speed : _____ m/s		4.20	634	Condition of Line Sheaves	
5.10.2	527	Overspeed Device Tested		4.20.9	635	Sheave Assemblies – Alignment	
5.10.3				4.15	636	Condition of Tower Foundations	
12.4.1	528	All Safety & Stop Switches		4.32.3	637	All Towers Grounded	
12.4.4	530	Emergency Evacuation Drive Tested		5.2/5.3/ 5.4	638	Lift Line Clearance	
12.4.4	531	Auxiliary Drive Tested		4.19.3	639	Towers Numbered	
B.	SCO	RETURN TERMINAL	OWNER	4.19.2	640	Tower Ladders Condition	
Code		General		4.20.10	641	Rope Catchers Condition	
4.32.1.5	541	Equipment and Terminal Grounding		4.19.5	642	Condition of Work Platforms	
4.15	542	Condition of Foundations		4.19.4	643	Condition of Lifting Frames	
12.9	543	Bullwheel Condition		5.8	619	Cabin guides	
4.26	544	Protection at Terminal Structure		12.9	645	Tower – Bolts & Fastenings Inspected	
4.20.9	545	Assembly Alignments		5.6.3	620	Track rope saddle	
5.17.3	522	Condition/Carriage Buffer Set up		5.2.5.3	626	Cabin Clearance	
12.9	547	Condition of Structure		11.7.3	629	Track Rope(s) Bollards & Anchors	
C.	SCO	TENSIONING EQUIPMENT	OWNER	11.7.4	628	Date of Last Track Rope(s) Socketing	
Code		General		11.7.3	629	Date of Last Track Rope(s) Slipping	
12.5.1.3	571	Carriage Clearances					
12.5	572	Counterweight Clearances Adequate					
12.5	573	Tension Carriage Condition					
11.15	574	Condition of Chains					
11.8.4	575	Counterweight Rope Condition					
12.9	576	Condition of Counterweight Sheave(s)					
4.12	577	Condition of Hydraulic Tension System					
4.23.3	578	Condition of Counterweight Adjustment				Operation	
		Operation		4.29.6	651	Deropement Switches Tested	
4.31.7	585	Counterweight Limit Switches Tested		4.31.6	653	Ground Fault System Tested	
4.31.7	586	Tension Carriage Limit Switches Tested					
4.23.5	587	Hydraulic Tension Switches Tested				CHECKLIST CONTINUED ON PAGE 2	

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F.	SCO	PASSENGER CARRIERS	OWNER	H.	SCO	GENERAL	OWNER
Code		General		Code			
5.14.3	630	Carriage Icescrapers		4.5.2	711	Power Line Clearance (Alberta Utility Code 1999, clause 4.7.12)	
12.18.3	662	Condition of Passenger Carriers		12.9	712	Condition of Electrical Components	
12.18.3	663	Condition of Grips & Hangers Date of Last N.D.T. _____		11.8.4	713	Condition of Anchors/Guy Lines	
5.15	646	Inspection platform		5.20		Evacuation	
5.16	647	Cabin Door locks		13.16.2	714	Evac. Equipment, Location & Condition	
4.28.7	666	Carriers Numbered		5.16.2			
5.11	648	Track Rope Brake Pull Test		13.19	715	First Aid Equipment & Personnel on site	
5.16.2	649	Tools and Emergency equipment in Cabin(s)		4.13.1	716	Fuel Storage	
12.11	650	Carriage Fixed Grips Relocated and Proof Tested		12.4.3			
5.11	654	Condition of Track Rope Brakes		13.20	717	Fire Extinguishers, Location & Condition	
11.8	655	Date of last Haul/Counter Rope Socketing		13.6.3	718	Housekeeping	
				4.35.3	719	Smoke Detectors Tested	
				4.34	720	All Signs Posted	
				13.2	721	Training (Operations and Maintenance)	
				12.4	722	Maintenance Log	
				11.14	723	Current Splice Certificate	
				11.13	724	Wire Rope Log	
				13.18	725	Daily Operation Log/Checklist	
				12.17	726	Date of last Load Test _____	
				4.37	727	Emergency Lighting Tested	
				4.39.3	728	Operation Manual	
				4.39.2	729	Manufacturer's Manual	

SIGNATURES

By signing this form, the owner or his designated representative certifies that all items that are marked with an "X", will be restored to safe operating condition and in accord with the applicable code before the lift is put into operation for use by the public.

AEDARSA I.D. # S _____

Have any alterations been made to the lift in the past 12 months? Yes _____ No _____

Examiner's Name (print) _____ Date _____

Examiner's Signature _____

Signature of Owner or Owner's Representative _____ Date _____

AUDITS ONLY

Safety Codes Officer's Signature _____ Date _____

Explain all items marked "X" (by the owner's safety examiner) below or on an attached page.