Alberta Elevating Devices and Amusement Rides Safety Association

APPLICATION FOR PERMIT 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# FEE This application is for a Permit of: Construction Major Alteration (Check beside the type of application) NOTE: Use one application form for each conveyance) See Note 1 Reverse Side for Fee Schedule **Applicant Name:** (Address, City, Postal Code) Contact #: **Contact Name: Email Address: Site Name** (Address, City, Postal Code) AGENT/OWNER (Address, City, Postal Code) **Contact Name:** Email Address: **Building General** Contractor: (Address, City, Postal Code) 6. Class of Fixed Conveyance: 7. Type of Fixed Conveyance: (See Note 2 Reverse Side) (See Note 3 Reverse Side) KG/LBS 8a. 8b. Openings Floors 8c. Capacity: 9a. Known As: 9b. Location: Firefighters Emerg Op (FEO): Yes ___ 10. Emerg. Power: Yes No_ FEO Required by Bldg Enforcing Authority: Yes No _ No _ 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 1 copy of each document. Note: Attach Additional Information as Required 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 11b changes do not compromise the original design criteria and Certificate of Conformance. Note: Attach Additional Information as Required 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. Indicate if this is a resubmission: YES NO 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 Is the submission based on a previously issued Provincial Variance?: YES NO 14. If YES what is the AMA Variance Number _____ Note: By signifying YES you are indifull compliance with the original granted variance and there are no design changes to that variance. Note: By signifying YES you are indicating the submission is designed in ALBERTA PROFESSIONAL ENGINEER'S STATEMENT 16. ALBERTA PROFESSIONAL ENGINEER'S SEAL and PERMIT 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 Signature: APPLICANT'S SIGNATURE PRINT NAME DATE

> **DEPARTMENT USE ONLY** ___ Variance granted: Yes ____ No ____ Conditions attached: Yes ___

> > SCO#

The information collected on this form is subject to the access and privacy provisions of the Freedom of Information and Protection of Privacy (FOIP) Act.

No

Permit issued: Yes

Application reviewed by _

__ No __

Date: