Alberta Elevating Devices & Amusement Rides Safety Association

Special Inspection Application

Note: P. Eng Endorsement is required for components that are not a Direct Replacement

Applicant: For additional information regarding fees and mailing address, please refer to: aedarsa.com

Please Print All Information
All sections of this form must be fully completed with accurate information.
Incomplete applications will not be processed, and inspections will not be scheduled.

AEDARSA assigned **E#**

1 This application is for a Special Inspection: ***Note:*** *A separate application must be submitted for each elevating device*	**FEE $100** Application fee must be paid prior to booking the inspection. See aedarsa.com for Fee Schedule
2 Applicant Name: (Name, Mailing Address, Phone Number, Email Address)	Contact Name: _____ Company Name: _____ Mailing Address: _____ Email Address: _____ Phone Number: _____
3 Site Name: (Building Name, Address, City, Postal Code)	Building Name: _____ Building Address: _____ City: _____ Building Postal Code: _____
4 Agent/Owner: (Name, Mailing Address, Phone Number, Email Address)	Contact Name: _____ Company Name: _____ Mailing Address: _____ Email Address: _____ Phone Number: _____
5 Building General Contractor: (Name, Mailing Address, Phone Number, Email Address)	Contact Name: _____ Company Name: _____ Mailing Address: _____ Email Address: _____ Phone Number: _____
6 Class of Elevating Device: See Note 1 at the bottom of the page.	**7 Type of Elevating Device:** See Note 2 at the bottom of the page.
8 Elevating Device Known-as Identification:	**9 Elevating Device Location:**

10 Special Inspection - Provide a description of the work to be performed and identify the specific component(s) to be inspected and tested.

Note: Attach Additional Information as Required

11 List all authenticated drawings and supporting documentation submitted by registered engineering professionals for work that involves changes not considered a direct replacement of existing components, or where endorsement by a registered professional engineer is required.

Note: Attach Additional Information as Required

12 Indicate if this is a resubmission: Yes ☐ No ☐

If plans are revised after registration, you are required to resubmit the updated plans and provide a clear, itemized list of all changes. All changes must be explicitly identified on the drawings or in a separate summary to ensure compliance verification and prevent delays in approval.

Note: Attach Additional Information as Required

13 Applicable Code Information Identify the Code being used for work performed in this application: _____ Identify the Code used at the time of the initial installation: _____	**14 Alberta Registered Engineering Professional Authentication and Permit to Practice.** *"I certify that the proposed Scope of Work and the accompanying drawings identify the applicable safety code requirements and demonstrate compliance with all relevant provisions of the Safety Codes Act and the adopted codes and standards. I further certify that all affected systems are designed to be safe for all intended modes of operation."*
15 Applicant's Signature:	

Department Use Only

Certificate issued: Yes ☐ No ☐ **Variance granted:** Yes ☐ No ☐ **Conditions attached:** Yes ☐ No ☐

Application reviewed by: _____ **SCO#:** _____ **Date:** _____

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

EDA/045/rev2025

Additional Information

Note 1: Class of Elevating Device	Note 2: Type of Elevating Device
Passenger Elevator	1) Electric/ Electric LULA/ Electric MRL 2) Hydraulic/ Hydraulic LULA/ Hydraulic MRL/ Roped Hydraulic 3) Winding Drum
Freight Elevator: i) Class A Loading ii) Class B Loading iii) Class C1 Loading iv) Class C2 Loading v) Class C3 Loading	1) Electric/ Electric MRL 2) Hydraulic/ Hydraulic MRL/ Roped Hydraulic 3) Winding Drum
Material Lift (Freight Platform Lifts)	1) Type A 2) Type B
Dumbwaiter, Inclined Lift, Escalator, Moving Walk, Personnel Hoist	N/A
Platform Lifts and Stair Lifts for Barrier-free Access	1) Vertical Enclosed 2) Vertical Unenclosed 3) Stair Platform 4) Stair Chair
Manlift	1) Power Type 2) Endless Belt Type