



Alberta Elevating Devices  
& Amusement Rides  
Safety Association

# Application For Certificate of Operation Amusement Rides

Please Print All Information

**THIS APPLICATION COVERS ALL RIDES.**

## I. Owner Information

Company Name: \_\_\_\_\_

City: \_\_\_\_\_

Street: \_\_\_\_\_

Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Person In Charge: \_\_\_\_\_

Email Address: \_\_\_\_\_

Title: \_\_\_\_\_

## II. Renewals: List all rides to be included in this application on Part 2. Ride Information

## III. New Rides:

Complete an APPLICATION FOR CERTIFICATE OF OPERATION: SUPPLEMENTARY FORM FOR NEW AND ALTERED RIDES EDA/046a and forward it and all related documents required in it with this application.

## IV. Altered Rides: Attach a description of the alteration.

Complete an APPLICATION FOR CERTIFICATE OF OPERATION: SUPPLEMENTARY FORM FOR NEW AND ALTERED RIDES EDA/046a and forward it and all related documents required in it with this application.

## V. Answer The Following Questions (check Yes, No or N/A for each question)

Yes	No	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Examination procedures implemented during erection
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Daily examination procedure implemented
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Ride speed does not exceed manufacturer's specifications
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Field repair welding carried out by qualified welders
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Assembly, operating and maintenance personnel are trained
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Itinerary attached (for portable rides)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Manufacturers recommendations for non-destructive testing performed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Maintenance program in place
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Manufacturer's directives respecting ride safety performed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Ride manuals on site
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Log Book on site and up to date

Explain each "No" answer below: (Give reasons and explain how equivalency is achieved. Attach additional information if required)

12. Planned opening date (or earliest date of ride operation for public) of Permanent Rides (at fixed sites) that operate on a seasonal basis in this application.

\_\_\_\_\_ M \_\_\_\_\_ D \_\_\_\_\_ Y

## VI. Owners Declaration

I, the undersigned, declare that the information provided in this application is true and correct.

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Position/Title

\_\_\_\_\_  
Date