



Alberta Elevating Devices
& Amusement Rides
Safety Association

As-Built Verification of New and Altered Passenger Ropeway or Passenger Conveyor

Site Name/Address: _____

Name of Ropeway/Conveyor: _____

Owner: _____

General Description of Scope of Work:

Name of Manufacturer: (original & altered) _____

AEDARSA® Device #: _____

Type of Ropeway: _____

Verification:

This installation complies with the original Application dated _____
for a valid Permit of construction or major alteration as follows:

- in its design, manufacture and installation
- the *Safety Codes Act*, adopted codes and CSA Z98-24 Passenger Ropeway and Passenger Conveyor Standard

1-(APEGA) Alberta Registered Engineering Professional Authentication and Permit to Practice

Signature: _____ Date: _____

Comments:

Note: Additional information and comments can be attached.