



Colorado Department of Labor and Employment
 Division of Oil and Public Safety – Conveyance Program
 633 17th Street, Suite 500
 Denver, CO 80202-3610

Phone: 303-318-8499
 Fax: 303-318-8534
 Email: cdle_conveyance@state.co.us
 Web: www.colorado.gov/ops

CONVEYANCE PERMIT APPLICATION

(1/1/2015)

The [Conveyance Regulations](#) require the submission of processing fees and a permit application stating the intent to install or alter a conveyance to the Conveyance Program 30 days prior to construction. Construction plans must be available upon request.

No installation or alteration construction activities shall begin until this application has been approved by the OPS and a permit has been issued. The OPS Conveyance Program requires that all components of the entire proposed installation or alteration have been verified by the Conveyance Manufacturer to meet all code-required safety factors for all loads, forces, impacts and general requirements as stated in the currently adopted codes.

One application can be submitted for multiple installations or alterations, provided that all work and/or installation are identical. This form can be used for escalators and moving walks.

Application Type (with Associated Fee)

Installation (\$300.00)

Alteration (\$150.00)

Choose One

Major Minor

Property Information

Building Name:			
Address:			
City:		County:	ZIP:

Owner Information

Owner/Management Company:			
Address:			
City:		State:	ZIP:
Contact Name:			
Phone Number:			
Email Address:			

Conveyance Contractor Information

Contractor Company:			
Address:			
City:		State:	ZIP:
Contact Name:			
Phone Number:			
Email Address:			

OPS Use Only

Date Received:		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Permit #:		Reviewer:	
Comments:			

Conveyance Information				
# of Conveyances:		Conveyance(s) Registered?		
Manufacturer:		Model:		
Conveyance Type:		Drive Type:		
Rated Load:		Rated Speed:		
# of Landings:		Total Rise:	ft	in
Proper Freight Signage:		Escalator angle degree:		
Conveyance ID #		Local ID #		Job Contract #
New Installation Information				
Pit	Buffer Type?		Sump Pump?	
	Buffer Stroke	in	Sprinkled?	
	Reduced Stroke	in	Refuge Space	ft in
	Pit Ladder?		Pit Depth	ft in
	# of Stop Switches		Alternative Car Clearance	ft in
Hoistway	Type		Top Refuge Space	ft in
	Pressurized?		Car Top Runby	in
	Sprinkled?		Car Bottom Runby	in
	CWT Location		CWT Top Runby	in
	<i>Accessible Space Below Hoistway?</i>		CWT Bottom Runby	in
	<i>Floor Over Hoistway?</i>		CWT Weight	lbs
	<i>Multiple Hoistways?</i>		Blind?	
			Ventilation?	
	Construction		Rail Length	
	Enclosure Surface?		Rail Bracket Spacing	
	Alternative Car Clearance	ft in	Rail Type	
		Angle Percentage?		

New Installation Information, continued				
Suspension	Type		Number	
	Size		in	Material?
Governor	Rope Size		in	Model
	Rope Type			Manufacturer
Machine/ Control Room Space	Machine Type		Valve Model	
	Location?		Motion Control Type	
	Sprinkled?		Operation Control Type	
	<i>Working Platform?</i>			
	<i>Temperature and Humidity Control Type?</i>			
	Valve Manufacturer		Construction?	
Safety Devices	Type?		Slack Rope Switch?	
	Duplex?		Counterweight?	
	Speed Governor Type?		Ascending Car Overspeed and Unintended Car Movement Protection?	
	Car Safety Switch?			
	Compensating Ropes?			
Car and Enclosure	Cab Panel Material		Flooring Material	
	Flame Rating/ Smoke Development		Critical Radiant Flux	
	Inside Car Dimensions		Car Weight	lbs
	Railing on Car Top?		Ventilation Type?	
	Inspection Operation?			
Doors/ Entrances	Car Doors		Hoistway Doors	
	Type (Passenger)?		Type (Freight)?	
	Glass?		Front and Rear?	
Emergency Operation	Firefighter Service?		Key Type?	
			Occupant Evacuation Operation?	
Layout Requirements	Complies With			

Alteration Information

Check as many as apply. If any components are not on the checklist, please check "other" and list the components to be altered. OPS may change the alteration designation from minor to major when the "other" box is checked.

Minor Alteration

<input type="checkbox"/>	Addition of power operation to door systems		
<input type="checkbox"/>	Changes to the guide rails, supports, or fastenings		
<input type="checkbox"/>	Changes to car or counterweight buffers where the load rating has been changed		
<input type="checkbox"/>	Increase or decrease of the dead weight of the car more than 5%		
<input type="checkbox"/>	Installation of new car or counterweight safeties or alteration of existing safeties		
<input type="checkbox"/>	Installation or alteration to a speed governor		
<input type="checkbox"/>	Alteration to the terminal stopping device		
<input type="checkbox"/>	Addition of a hoistway entrance		
<input type="checkbox"/>	Cab panels	Material	Flame Spread
			Smoke Development
<input type="checkbox"/>	Flooring	Material	Critical Radiant Flux
<input type="checkbox"/>	Change to or replacement of a hydraulic jack, plunger, or cylinder		
<input type="checkbox"/>	Installation of a plunger gripper		
<input type="checkbox"/>	Replacement of an existing control valve with a valve of another type	From	To
<input type="checkbox"/>	Replacement of a hydraulic tank		
<input type="checkbox"/>	Replacement of a hydraulic tank and valve (power unit)		
<input type="checkbox"/>	Increase in working pressure by more than 5%		
<input type="checkbox"/>	Alteration to emergency/standby power system		
<input type="checkbox"/>	Controller replacement for a hoistway/car door or car gate		
<input type="checkbox"/>	Other:		

Major Alteration

<input type="checkbox"/>	Increase of rate load:	From:	lbs	To:	lbs
<input type="checkbox"/>	Increase of rated speed:	From:	fpm	To:	fpm
<input type="checkbox"/>	Increase or decrease in rise:	From:	ft in	To:	ft in
<input type="checkbox"/>	Installation or alteration of driving machine, driving machine brake or driving machine sheaves (this includes moving a driving machine).				
<input type="checkbox"/>	Change in the type of service of an elevator:	From:		To:	
<input type="checkbox"/>	Changes in a freight elevator to allow passengers				
<input type="checkbox"/>	Installation or replacement of the controller	From:		To:	
<input type="checkbox"/>	Any alteration of a dumbwaiter, material lift				
<input type="checkbox"/>	Other:				

Branch Manager/Agent Certification

I certify that all components of the entire proposed installation or alteration have been verified by the conveyance manufacturer or component manufacturer to meet all code-required¹ safety factors for all loads, forces, impacts and general requirements as stated in the currently adopted versions of code.

Contractor/Owner Representative:		Title:	
Signature:		Date:	

¹ Includes but is not limited to ASME, NFPA, ICC, local jurisdiction ordinances and other codes that are applicable to the installation or alteration of the conveyance(s).