INSTRUCTIONS FOR COMPLETING A CONVEYANCE ALTERATION PERMIT APPLICATION

- 1. For application type, check box for "Alteration".
- 2. Enter the property (facility) information.
- 3. Enter the owner or management company contact information.
- 4. Enter the Conveyance Contractor information. The email address for the contractor is where the permit will be sent.
- 5. Complete all of the requested fields for conveyance information.
- 6. If the conveyances are identical (type, rated speed, landings, rise and rated load) multiple conveyances may be listed on the application. The conveyance ID is the number assigned by the Division of Oil and Public Safety (OPS) for example CP08-000003. Facility and conveyance information is available on the conveyance database.
- 7. For the scope of alteration, choose from the drop down menus.
- 8. The drops downs are "categories" of alteration types (minor, major and substantial). Under "Other Scope", note the specifics of the alteration. For example: "New TAC32 controller, new cab panels (Wilsonart vinyl Flame Spread = 20, Smoke Development = 40).
- 9. Reminder: Substantial alteration permits will be issued for:
 - a. Change in type of service
 - b. Change in type of operation or motion control
 - c. The installation of a controller.

For a substantial alteration, scope must include fire service meeting ASME A17.1 2019 code requirements

Please enter all information on the permit application. Do not send additional attachments unless specifically requested by OPS.

Contact us with any questions.



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Conveyance Permit Application

(Revised 12/31/2020)

The <u>Conveyance Regulations</u> 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 the Conveyance Program has issued a permit. One application can be submitted for multiple installations or alterations, provided that all work or installations are identical.

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Application Type (with Associated Fee)										
□Installation	Compliant with ASME A17.1 2019 as amended by Section 2-7(8) of Conveyance Regulations. Compliant with ASME A17.1 2019									
□Alteration										
Property Information										
Building Name:										
Address:										
City:			County:			ZIP:				
Owner Information										
Owner/Management Com	pany:									
Address:										
City:			State:			ZIP:				
Contact Name:										
Phone Number:										
Email Address:										
Conveyance Contractor Information										
Contractor Company:										
Contact Name:										
Phone Number:										
Email Address:										
		Conveyance In	formatio	n						
Manufacturer:	_		Model:							
Conveyance Type:			Rated I	₋oad:	ad:		lbs			
Rated Speed:		fpm	Total R	ise:		ft	in			
# of Landings:			Install \	Year (if a	alteration):					
Conveyance ID #		Local ID #			Job Contract #		t #			
		1		1						

Alteration Information								
Elevator								
Scope of Alteration:								
Scope of Alteration:								
Other Scope (if not included above):								
Additional Information:								
Escalator or Moving Walk								
Scope of Alteration:								
Other Scope (if not included above):								
Additional Information:								
 Check this box to verify Sprinklers are required Sprinklers are required per NFPA 13. The OPS Conveyant 	red in the pit for ne red at the top of the	ewly-installed hy e hoistway for al	draulic elev Il belted sys	vators pe stems not	meeting the UL fire rating			
Owner or Contractor Certification								
I certify that all compone conveyance manufacture loads, forces, impacts an	or component ma	anufacturer to r	meet all co	de-requi	red ¹ safety factors for all			
Owner/Contractor Name:								
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).