

Hydraulic Elevator Control Valve Replacement/Re-Sealing Declaration Submit Declarations to reports@aedarsa.com

General	Date:		Elevator #:	Сарас	ity:			
	Government E#: Building Name:		а. Г	7_	П			
			── Class: L	」Passenger □ Material Lift	Freigh Other	t		
	Address:							
	City:							
	This Declaration is being used for: A) Valve Replacement Or B) Re-Sealing Relief-Valve							
Record the Existing Valve Make and Model here: Record the Replacement Valve Make and Model here:								
Has the replacement valve been designated as a direct replacement by the valve manufacturer?						No 🔲		
Are the Mechanical Properties of the Replacement Valve the same as the existing valve?						No		
Is the electrical interface required to connect the replacement valve the same as the existing interface?								
If any of the answers to the above questions is No the valve replacement has been identified as an								
Alteration and will require an Acceptance Inspection before the device can be returned to service.								
Hydraulic Tests	Is the Working Pressure Posted in th	e Machine Roor			Yes			
	The Working Pressure is: Has the Relief-Valve Setting been Tested to meet the requirements of 8.6.5.14.1?					psi		
	That the Keller-Valve Setting been Tested to meet the requirements of 6.6.3.14.1:							
	The Relief-Valve Pressure is					psi		
	Has a Temporary Seal been installed on the Relief-Valve adjustment means? (Required by Municipal Affairs STANDATA)							
	Has the System Pressure Test required by 8.6.5.14.1 been performed?							
	Have the Valve Manufacturers' Installation and Testing Procedures been followed?							
	Note: If adjustments were made to the Relief-Valve as part of			Data Plate been	Yes			
	Regular Maintenance and a		d-Load Speed in t	the Up Direction is	:	fpm		
	Temporary Seal has been			Down Direction is		fpm		
				pad Speed in the Up Direction is:		fpm		
	not required to be recorded.	The No-Load Speed in the Down Direction is:			:	fpm		
Any blank fields or conflicting data may result in the device being removed from service until an Acceptance Inspection is completed.								
Name of Contractor Performing Tests: Date:								
Name of Mechanic: Mechanic Signature:								
Your signature on this form constitutes your legally binding representation that the work herein referred to complies with all applicable Acts, Regulations, Codes, and Standards.								
AEDARSA USE ONLY								
AEDANGA USE UNLT								

AEDARSA USE ONLY								
SCO Name	SCO ID	Signature:	Date Valve Sealed					

EDA092 rev 1.15

FOIP "The personal information is being collected in support of the administration of the *Safety Codes Act*. The authority to collect the personal information is made pursuant to section 33(c) of the *Freedom of Information and Protection of Privacy (FOIP) Act and* will be managed in accordance with the privacy provisions of the *FOIP* Act.