Commonwealth of Massachusetts
Recreational Tramway Board
PRIOR TO OPERATION (PTO) AFFIDAVIT

Please send affidavit to:
Department of Public Safety, Recreational Tramway Board, 1 Ashburton Place, Room 1301, Boston, MA 02108
Tel: 617-727-3200 Fax: 617-248-0813 Web: www.mas.gov/dps

I, _____ of _____
(print name of owner/operator) (name of ski area)

hereby certify under the pains and penalties of perjury by affixing my signature below, that each of the items of noncompliance identified in the certified inspector's report(s) have been corrected and that each tramway identified below is now in compliance with 526 CMR and the current ANSI Requirements:

1. MA-RTB- _____ Signature of owner/operator: _____
2. MA-RTB- _____ Signature of owner/operator: _____
3. MA-RTB- _____ Signature of owner/operator: _____
4. MA-RTB- _____ Signature of owner/operator: _____
5. MA-RTB- _____ Signature of owner/operator: _____
6. MA-RTB- _____ Signature of owner/operator: _____
7. MA-RTB- _____ Signature of owner/operator: _____
8. MA-RTB- _____ Signature of owner/operator: _____
9. MA-RTB- _____ Signature of owner/operator: _____
10. MA-RTB- _____ Signature of owner/operator: _____

(please attach additional sheets if necessary)

_____
Date