

Product Submission Form

The Product Submission Form is used to submit new products to be considered for addition to Alberta Transportation's [Products List](#). This form is also used to submit new products where no department standard or specification currently exists (new products considered experimental or innovative). Alberta Transportation may require updates, resubmission of this form, or further testing to maintain status of products.

General Instructions:

1. A completed Product Submission Form must accompany all new product submissions to Alberta Transportation.
2. Applicants must provide the requested information, as this data will be used by Alberta Transportation's Innovations Evaluation Group to assist in the initial review of the product. A letter of receipt and status report will be issued following the initial appraisal.
3. Review of new product submissions will be completed within one to two months if all necessary documentation is provided. Incomplete forms and/or erroneous information provided as part of this form will result in the product being rejected.
4. A separate form must be completed for each new product submitted.

Important:

Alberta Transportation will determine the test methods used to conduct its initial and ongoing evaluation of products submitted. The manufacturer/supplier may be contacted to supply the product and any special equipment needed to install the product at an Alberta Transportation test site. All product samples submitted to Alberta Transportation for evaluation shall become the property of Alberta Transportation and will not be returned unless otherwise agreed to prior to evaluation. The manufacturer/supplier will be encouraged to oversee trial installations of the product.

Inquiries can be directed to:

Innovations Unit
Safety, Policy and Engineering Division
2nd Floor, Twin Atria Building
4999-98 Avenue
Edmonton, Alberta T6B 2X3
Attn: F]g\]5X\]Uf]

Email: trans.innovations@gov.ab.ca

Product Submission Form

SUPPLIER INFORMATION

Supplier name: _____
Address: _____ City: _____
Province/State: _____ Postal/Zip code: _____
Contact person: _____
Phone: _____ Fax: _____
Email: _____

MANUFACTURER INFORMATION (IF DIFFERENT FROM SUPPLIER)

Manufacturer name: _____
Address: _____ City: _____
Province/State: _____ Postal/Zip code: _____
Contact person: _____
Phone: _____ Fax: _____
Email: _____

PRODUCT INFORMATION

Product name: _____
Product website: _____
Intended purpose or use of product:

Is this product currently in use or under review by another transportation agency?

Yes No

If yes, provide details including contact person(s) with address and/or phone number:

Is this product approved for general use by the agency (or agencies) identified above?

Yes No

If yes, please specify and attach documentation of approval.

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Has this product been evaluated for environmental impact?

Yes No

If yes, attach environmental studies.

Is this product Workplace Hazardous Materials Information System (WHMIS) controlled?

Yes No N/A

If yes, attach MSDS (note: MSDS must conform to WHMIS standards).

Does this product meet the requirements of a recognized specification agency (i.e., CSA, ASTM, CGSB, AASHTO)?

Yes No N/A

If so, state agency and specification number:

Does this product comply with Alberta Transportation specifications?

Yes No

If so, state specification number:

Is a product warranty provided?

Yes No

If yes, attach warranty documentation.

Estimated cost per unit: _____

Estimated cost per unit installed: _____

For the purpose of evaluation, would you be interested in providing this product at no charge for a trial installation?

Yes No

Can a demonstration be provided (on installation methods or special equipment used) by the manufacturer or supplier?

Yes No

Provide links to relevant product educational/instructional information or videos:

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ATTACHMENTS PROVIDED

Attach separately, max. 5120 KB per file

** Indicates mandatory documents*

- Environmental studies
- MSDS
- Relevant product literature/technical data *
- Test data (lab and field reports) *
- Installation instructions (include pictures/drawings/videos) *
- Documentation of approval by other agencies
- Warranty documentation

Submission form completed by (Name and Title): _____

Company name: _____

Phone: _____ Email: _____

Date: _____

I certify the information provided above is accurate and correct (Initials): _____

Internal Use Only

Date received: _____

File #: _____

IEG review:

- Accepted Rejected More information required

Recommendations for furtherance: