Technical Standards and Safety Authority
345 Carlingview Drive
Toronto, Ontario M9W 6N9
Customer Service: 1.877.682.8772
Fax: 416.734.3568
www.tssa.org

APPLICATION FOR DATABASE PRODUCT

Clear Form

TSSA use only	Request #

SECTION I
APPLICATION INFORMATION

PROGRAM (check ALL that apply)

☐ Boilers & Pressure Vessels ☐ Elevating & Amusement Devices ☐ Fuels

1. Applicant Information

Organization Name:

Requestor's Name Tel.#:

Email Date

2. Business Address

Street City

Province Postal Code

3. Registered Ontario Business Address (if different from above)

Street City

Province Postal Code

4. Indicate Status & Jurisdiction of Applicant

☐ Corporation
Indicate: Province of Incorporation Corporation No.

☐ Sole Proprietorship

☐ Other
Indicate: Province of Registration

5. Description of Business (set out fully) and nature of business or other activity:

6. If your business is required by law to be licensed (in Canada/Province) e.g. Consumer reporting agency, please complete the following:

Governing Body:

Licence Type:

Licence No.:

Registration No.: Expiry Date:

7. State whether any previous application has been made for TSSA Database Information Products

(If so, describe dates and circumstances)

SECTION II

DATABASE PRODUCT DESCRIPTION

8. Please complete attached Schedule A setting out details of the TSSA Database Product requested. (Add additional page if necessary)

USE OF DATABASE INFORMATION PRODUCT

9. Describe the business application in which the TSSA Database Product applied for will be used and its purpose. (Explain fully and accurately).

Will the information be combined or merged (in whole or in part) with other data? (If so, describe other data and its source)

Will the information be used to create other products (in whole or in part)? (If so, describe fully).

Will the information fully be duplicated and/or resold or otherwise assigned or transferred in whole or in part? (If so, describe).

Will the information be used or transferred out of Province of Ontario? (If so, explain circumstances).

SECTION III
PERSONAL INFORMATION REQUESTS

10. Personal information means any recorded information about an identifiable individual. (Such as age, sex, home address, education & employment history.) If requesting personal information, state the specific purpose(s) of the use of this information and describe the associated benefits.

11. Will any personal information be used or disclosed in a form in which the person to whom it relates can be identified? (If so, explain fully).

12. Will the applicant, any of its employees, agents or any other person contact any individual to whom personal information relates? (If so, explain fully, including direct/indirect marketing purposes).

13. State the capacity of persons to be given access to personal information (where applicable), including officers, employees, agents, consultants and any other parties.

14. Attach a copy of Procedures established to protect the confidentiality and integrity of any personal information to be used or of any derivative product which will contain personal information (include security procedures for access to such data).

SECTION IV

CONTRACTUAL INFORMATION

15. Should your application be approved, you will be required to enter into an agreement with the Technical Standards & Safety Authority to purchase the TSSA Database information products

Print the name and title of the person authorized to sign the agreement and who will be responsible for compliance with the terms and conditions of the Agreement pertaining to the access and use of information from the Technical Standards & Safety Authority.

Organization Name

Requestor's Name **Title**

Description of position within the organization:

Affirmation
I certify that the information in this application and attached schedule is true and correct. (Must be person listed in item #15)

Executed at

City

Province

Signature

Date

SCHEDULE A

TSSA use only	Request #

LIST SPECIFIC DETAILS (e.g. geographical location, device class, etc.) OF DATA REQUESTED

Details	**TSSA Use Only** Approved/Denied

Please indicate how information is to be supplied: Hard Copy ☐ ASCII ☐ Excel ☐

Service	Fee Type	Fee	HST	Total (Including HST)	Total Fees Due
DATABASE PRODUCTS					
Research and review request (Fee will be determined on a case by case basis)	Minimum*	$ 133.50	$ 17.36	$ 150.86	$ 150.86
Total Fees Due		**$ 133.50**	**$ 17.36**		$ 150.86

1

If paying by credit card, amount in Box 1 to be entered in TSSA Service Prepayment Portal

All required fees must be prepaid for application to be processed. Fees are non-refundable.
For payment options, see Payment Instructions

Note: Expedited (Rush) service is not available for Public Information requests.

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PAYMENT INSTRUCTIONS

TSSA use only	L #	CH #
WO # _____		

Payment Options:

☐ **Credit Card - Click link below**

TSSA Service Prepayment Portal
https://forms.tssa.org/Payments/Service-Prepayment-Portal