



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

Application for Release of Public Information

Amusement Devices

Issued under the Access and Privacy Code

A. REQUESTOR INFORMATION:

Your File/Project/Reference No: _____ Date: _____

Requestor Name:		Organization		For Office Use Only	
Suite/Unit No:	Street No:	Street Name:			Authorization No.
City:	Province:	Postal Code:			Account No.
Primary Phone:		Secondary Phone:			SR No.
Email:		Fax:			P.I No:

B. DETAILS OF REQUEST (please list in detail the information you require)

C. PLEASE ANSWER ALL THAT APPLY (up to 4 requests per application):

	Request 1	Request 2	Request 3	Request 4
Address of Subject Location:				
Street # and Name*				
City				
Province				
Postal Code:				
Device/Equipment Type:				
Owner:				
CRN (if applicable):				
OIN (if applicable):				
Serial # (if applicable):				
Victim Name (if applicable):				
Certificate Holder:				
Name				
Date of Birth(DD-MM-YY)				
Date/Period Requested:				
Most Recent				
or				
From (date)				
To (date)				

* Enter only one address per request (e.g. 1 Any Street)



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D. REASON FOR REQUEST (please explain the reason for your request)

E. TERMS AND CONDITIONS:

Please refer to the link for our Access and Privacy Code [Access and Privacy Code.pdf](#). If this request includes a release of personal information, TSSA will require consent from the effected party.

Applicant Signature	Date
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F. FEES & PAYMENT:

If you need assistance in determining the quantity and service type, please contact us at: publicinformationsservices@tssa.org before completing this form. TSSA will provide a fee quote for multiple record requests, which must be approved by the Applicant before a record search commences. For fees for single searches, please see below or refer to our [Website Fee Schedule.pdf](#)

(HST Registration No: 891131369)

Enter Quantity	Service	Fee Type	Fee	HST	Total (Including HST)	Quantity	Total Fees Due
WRITTEN REPLIES FOR INDIVIDUAL RECORDS							
	Devices inspection reports and "No Record" letters	Per Report	\$ 40	\$ 5.20	\$ 45.20	x	=
	Devices status report (6 devices per report)	Per Report	\$ 70	\$ 9.10	\$ 79.10	x	=
	Devices incident/occurrence reports	Per Report	\$ 80	\$ 10.40	\$ 90.40	x	=
	Copy of Technical Dossier	Per Device	\$ 80	\$ 10.40	\$ 90.40	x	=
	Written/hard copy confirmation of licensing, certification, registration	Per Item	\$ 50	\$ 6.50	\$ 56.50	x	=
SUPPLYING MULTIPLE RECORDS							
	Pulling files, looking up information on computer. Researching information (consulting with other staff & sources)	Per Hour*	\$ 120	\$ 15.60	\$ 135.60	x	=
	Research and/or review of documents for disclosure. Computer costs (programming, consulting, researching)	Per Hour*	\$ 120	\$ 15.60	\$ 135.60	x	=

Total Fees Due				
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1

If paying by credit card, value 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**

*Supplying multiple records will be charged at the applicable hourly rate. One hour minimum fee required with submission, any additional hours will be invoiced. **Note: Expedited (Rush) service is not available for Public Information requests.**



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PAYMENT INSTRUCTIONS

TSSA use only	L #	CH #
WO # _____		

If paying by cheque, bank draft, money order, this form must accompany all applications submitted to TSSA. A separate payment form is required for each application. Please refer to our fee schedule posted on our website www.tssa.org. HST Registration No: 891131369.

Payment Options:

Credit Card - Click link below

[TSSA Service Prepayment Portal](https://forms.tssa.org/Payments/Service-Prepayment-Portal)

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

Cheque, Bank Draft or Money Order (payable to Technical Standards and Safety Authority)

Name of Applicant/Organization:

Telephone No:

Email Address:

Cheque/Bank Draft/Money Order #: _____

Mail payment along with a copy of your application to:

Attention: Accounts Receivable
Technical Standards and Safety Authority
345 Carlingview Drive
Toronto, Ontario M9W 6N9

If a copy of the application is not submitted with your payment, this will delay the processing of the application.

Dishonored Payments: A \$35 administration fee will apply for each returned item