



Company (Applicant) Name: _____

Corp No. or Business Identification No: _____ Phone Number: _____

Company Contact Name (Billing): _____ Email: _____

Company Contact Name (Quality Program): _____ Email: _____

Billing/Mailing Address:

Street No: _____ Street Name: _____ Unit/Suite: _____

City/Town: _____ Province/State: _____ Postal/ZIP Code: _____ Country: _____

Department/Division: _____

Facility Address: [] Same as billing/mailling address

This application is for (check all applicable):

Table with 3 columns of checkboxes for application types: New Certificate(s), Renewal Certificate(s), Shop Site, Field Site, ASME and CSA, CSA B51 / CSA B52, Modified Assessment, Facility Address Change, Name Change, Quality Program Addition.

Current Certificate of Authorization Number(s): _____

Expiration Date(s): _____

Type of Certificate of Authorization for which application is being made (check all applicable):

- Power Boilers Manufacturer, Heating Boilers Manufacturer, Power Boiler Assembly, Heating Boiler Assembly, Pressure Vessels Manufacturer, Division 1, Division 2, Division 3, Power Piping Systems per ASME B31.1, Process Piping Systems per ASME B31.3, Refrigeration Piping per ASME B31.5, Medical Gas Piping per CSA Z7396.1, Repairs and Alterations of Boilers and/or Pressure Vessels, Pressure Relief Valve Repair, Fitting Manufacturer A-H, Hot Tap & Line Stopping, On-Line Leak Sealing, Owner/User Repair with Self Inspection, Management Program for Safety Relief Valve Service Interval, Installation and Operation of Pressure Vessels per ASME BPVC Section VIII Division 1 Appendix M, Third Party Authorized Inspection Agency

Is the Company a Trades Association BPV Quality Program Member with the MCAO, ORAC or HRAI? Yes No

Name of Authorized Inspection Agency (outside Ontario only): N/A _____

Does the Company have a signed TSSA inspection services agreement? Yes No

Audit Fee Deposit:

#	Description	Deposit Required	Amount Submitted
1	All Non-Nuclear Certificates	\$3,267*	
2	Trades Association Member (submit proof of membership with application)	\$2,311*	
3	Third Party Authorized Inspection Agency Program	\$4,349*	
4	Modified Assessment	Current Hourly Rate per Fee Schedule* (Minimum 4-hour charge)	
5	Installation and Operation of Pressure Vessels per ASME BPVC Section VIII Division 1, Appendix M and Management Program for Safety Relief Valve Service Interval	Current Hourly Rate per Fee Schedule*	

Notes:

- 1) Ontario applicants, please include a cheque for the audit deposit fee with this application as shown above.
- 2) Total audit charges will include the above noted deposit amount, plus hourly billing at the current inspection rate as outlined in the Boiler and Pressure Vessels Fee Schedule for the Authorized Inspector and Authorized Inspector Supervisor's travel, expenses and audit time (this applies to ASME and CSA B51 audits).
- 3) **Applicants outside of Ontario do not send payments.** After receipt of the application, a quote will be provided and prepayment in the full amount of the quote will be required prior to scheduling the audit.
- 4) Any extra time for Team Leaders and Inspectors (if required) due to additional location and follow-ups will be billed per current inspection rate as outlined in the Boilers and Pressure Vessels Fee Schedule.
- 5) The following activities related to the audit such as Quality Manual pre-reviews, meetings and/or consultations, pre-audit inspections (and/or site visits), and post-audit follow-ups (site visits and/or document review) will be billed at the current inspection rate as outlined in the Boilers and Pressure Vessels Fee Schedule.
- 6) Each Certificate of Authorization will be invoiced at a cost of **\$94.00** per certificate, upon completion of a successful audit.
- 7) *13% HST is applicable to the audit fee, hourly inspection billing, and cancellation/postponement fees.
- 8) Inspection fees may also apply to TSSA Ontario audits and are invoiced separately in addition to the Audit Fee Deposit.
- 9) **Cancellation Fees:** Cancellation or postponement, by an applicant, of a previously scheduled audit in Ontario, which occurs 15 working days or less from the agreed site implementation audit date, is invoiced as follows:

Non-Nuclear audits **\$1,020**
- 10) Cancellation or postponement, by an applicant, outside Ontario, which occurs 30 working days or less from the agreed site implementation audit date will be invoice per above Cancellation or Postponement Fee and any additional charges due to airfare changes.

By signature below and as a part of TSSA's accreditation the applicant accepts all conditions related to the issue and use of the Certificate of Authorization provided by TSSA and agrees to unannounced TSSA audits of the program at TSSA's discretion.

<p>Send this application with a cheque to (if applicable):</p> <p>Technical Standards and Safety Authority Boilers and Pressure Vessels Safety Program 345 Carlingview Drive Toronto, Ontario, M9W 6N9</p> <p><u>Or</u></p> <p>Send this application with the attached Credit Card Form to (if applicable):</p> <p>bpvqa@tssa.org</p>	APPLICANT AUTHORIZATION	
	Name (print):	
	Signature:	
	Date:	



Technical Standards & Safety Authority

Application for Non-Nuclear Ontario Certificate of Authorization
Credit Card Form
Technical Standards and Safety Act
Boilers and Pressure Vessels Regulation



Technical Standards and Safety Authority

345 Carlingview Drive
Toronto, Ontario
M9W 6N9

COMPLETE FOR CREDIT CARD PAYMENTS

Charge my credit card: VISA MASTERCARD

Amount of Payment \$ _____

Card #

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Expiry Date

Month	Year

In payment of _____ Client ID No. _____

Name of Card Holder _____ Client Tel. No. _____
First Name *Last Name*

Signature of Card Holder _____ Date: _____

TSSA 09163 (06/04)



Technical Standards & Safety Authority
Application for Non-Nuclear Ontario Certificate of Authorization
Technical Standards and Safety Act
 Boilers and Pressure Vessels Regulation

Company (Applicant) Name: 1

Corp No. or Business Identification No: 2 Phone Number: 3

Company Contact Name (Billing): 4 Email: 5

Company Contact Name (Quality Program): 6 Email: 7

Billing/Mailing Address: 8

Street No: _____ Street Name: _____ Unit/Suite: _____

City/Town: _____ Province/State: _____ Postal/ZIP Code: _____ Country: _____

Department/Division: 9

Facility Address: Same as billing/mailling address 10

This application is for (check all applicable):

<input type="checkbox"/> New Certificate(s) <u>11</u>	<input type="checkbox"/> Shop Site <u>12</u>	<input type="checkbox"/> Modified Assessment <u>14</u>
<input type="checkbox"/> Renewal Certificate(s)	<input type="checkbox"/> Field Site <u>12</u>	<input type="checkbox"/> Facility Address Change
	<input type="checkbox"/> ASME and CSA <u>13</u>	<input type="checkbox"/> Name Change
	<input type="checkbox"/> CSA B51 / CSA B52 <u>13</u>	<input type="checkbox"/> Quality Program Addition

Current Certificate of Authorization Number(s): 15

Expiration Date(s): 16

Type of Certificate of Authorization for which application is being made (check all applicable):

Power Boilers Manufacturer Boiler External Piping (other than boiler certificate holder) 18

Heating Boilers Manufacturer 19

Power Boiler Assembly Heating Boiler Assembly 21

Pressure Vessels Manufacturer Division 1 Division 2 Division 3 22

Power Piping Systems per ASME B31.1

Process Piping Systems per ASME B31.3 23

Refrigeration Piping per ASME B31.5

Medical Gas Piping per CSA Z7396.1

Repairs and Alterations of Boilers and/or Pressure Vessels 24

Pressure Relief Valve Repair 25

Fitting Manufacturer A B C D E F H 26

Hot Tap & Line Stopping 27

On-Line Leak Sealing 28

Owner/User Repair with Self Inspection 29

Management Program for Safety Relief Valve Service Interval 30

Installation and Operation of Pressure Vessels per ASME BRVC Section VIII Division 1 Appendix 2 31

Third Party Authorized Inspection Agency 32

Is the Company a Trades Association BPV Quality Program Member with the MCAO, ORAC or HRAI? Yes No 33

Name of Authorized Inspection Agency (outside Ontario only): N/A 34

Does the Company have a signed TSSA inspection services agreement? Yes No 35

Audit Fee Deposit:

#	Description	Deposit Required	Amount Submitted
1	All Non-Nuclear Certificates	\$3,267*	<u>36</u>
2	Trades Association Member (submit proof of membership with application)	\$2,311*	<u>37</u>
3	Third Party Authorized Inspection Agency Program	\$4,348*	<u>38</u>
4	Modified Assessment	Current Hourly Rate per Fee Schedule* (Minimum 4-hour charge)	<u>39</u>
5	Installation and Operation of Pressure Vessels per ASME BRVC Section VIII Division 1, Appendix M and Management Program for Safety Relief Valve Service Interval	Current Hourly Rate per Fee Schedule*	<u>40</u>

- Notes:**
- Ontario applicants, please include a cheque for the audit deposit fee with this application as shown above.
 - Total audit charges will include the above noted deposit amount, plus hourly billing at the current inspection rate as outlined in the Boiler and Pressure Vessels Fee Schedule for the Authorized Inspector and Authorized Inspector Supervisor's travel, expenses and audit time (this applies to ASME and CSA B51 audits).
 - Applicants outside of Ontario do not send payments.** After receipt of the application, a quote will be provided and prepayment in the full amount of the quote will be required prior to scheduling the audit.
 - Any extra time for Team Leaders and Inspectors (if required) due to additional location and follow-ups will be billed per current inspection rate as outlined in the Boilers and Pressure Vessels Fee Schedule.
 - The following activities related to the audit such as Quality Manual pre-reviews, meetings and/or consultations, pre-audit inspections (and/or site visits), and post-audit follow-ups (site visits and/or document review) will be billed at the current inspection rate as outlined in the Boilers and Pressure Vessels Fee Schedule.
 - Each Certificate of Authorization will be invoiced at a cost of **\$94.00** per certificate, upon completion of a successful audit.
 - *13% HST is applicable to the audit fee, hourly inspection billing, and cancellation/postponement fees.
 - Inspection fees may also apply to TSSA Ontario audits and are invoiced separately in addition to the Audit Fee Deposit.
 - Cancellation Fees:** Cancellation or postponement, by an applicant, of a previously scheduled audit in Ontario, which occurs 15 working days or less from the agreed site implementation audit date, is invoiced as follows:
 Non-Nuclear audits **\$1,020**
 - Cancellation or postponement, by an applicant, outside Ontario, which occurs 30 working days or less from the agreed site implementation audit date will be invoice per above Cancellation or Postponement Fee and any additional charges due to airfare changes.

By signature below and as a part of TSSA's accreditation the applicant accepts all conditions related to the issue and use of the Certificate of Authorization provided by TSSA and agrees to unannounced TSSA audits of the program at TSSA's discretion.

Send this application with a cheque to (if applicable): Technical Standards and Safety Authority Boilers and Pressure Vessels Safety Program 345 Carlingview Drive Toronto, Ontario, M9W 6N9 Or Send this application with the attached Credit Card Form to (if applicable): bpvqa@tssa.org	APPLICANT AUTHORIZATION	
	Name (print):	<u>41</u>
	Signature:	
	Date:	



Item #	Description
1	Enter the legal Company name – The full legal Company name here will appear on the Certificate(s) of Authorization.
2	Enter the Company corporate number or Identification number. If not applicable, leave blank or state “N/A”.
3	Enter the Company phone number with extension number (if applicable).
4	Enter the Company contact name for the individual responsible for billing.
5	Enter the billing contact email address.
6	Enter the Company contact name for the individual responsible for the Quality Program.
7	Enter the Quality program contact email address.
8	Enter the Company billing/ mailing address.
9	If a specific department/division is required on the certificate, include the information here. If not applicable, leave blank or state “N/A”.
10	Check box if the facility address is the same as the billing/ mailing address. If the facility address is different, include the information on the line provided.
11	Check the appropriate box if applying for new certificate(s) or renewing current certificate(s), or check both if renewing a certificate and adding a new certificate.
12	Check the appropriate box if the application pertains to a shop site, field site, or both.
13	Check the appropriate box if applying for certification under the ASME and CSA Codes (this includes Companies requesting certificates from ASME and TSSA) or under the CSA Codes only (this includes Companies requesting certificates from TSSA only).
14	Check box if applying for a modified assessment. If applying from outside Ontario, select this box. Check any appropriate box(es) for the modified assessment type (if applicable). Check the “Quality Program Addition” box if the Company is applying for an additional Certificate of Authorization prior to the renewal of current Certificate(s) of Authorization. Contact bpvcustomerservice@tssa.org for any further clarification.
15	List the current Certificate of Authorization number(s) the Company currently holds. If none, leave blank or state “N/A”.
16	Enter the expiration date(s) of the current Certificate(s) of Authorization the Company currently holds. If not applicable, leave blank or state “N/A”.
17	Check box if the Company is applying for Power Boilers Manufacturer per ASME Section I.
18	Check box if the Company is applying for Boiler External Piping per ASME Section I and ASME B31.1. When a Company holds a Certificate of Authorization for Power Boilers Manufacturer or Heating Boilers Manufacturer, an additional Boiler External Piping Certificate of Authorization is not required.
19	Check box if the Company is applying for Heating Boilers Manufacturer per ASME Section IV.
20	Check box if the Company is applying for Power Boiler Assembly per ASME Section I.
21	Check box if the Company is applying for Heating Boiler Assembly per ASME Section IV.
22	Check box if the Company is applying for Pressure Vessels Manufacturer per ASME Section VIII. Check the appropriate Division the Company is applying for.
23	Check any appropriate box(es) the Company is applying for per ASME B31.1, ASME B31.3, ASME B31.5 or CSA Z7396.1. This application includes the repairs and alterations of piping systems.
24	Check box if the Company is applying for Repairs and Alterations of Boilers or Pressure Vessels per NBIC-23.
25	Check box if the Company if applying for Pressure Relief Valve Repair.
26	Check box and associated categories of fittings if applying for Fitting Manufacture.
27	Check box if the Company is applying for Hot Tap & Line Stopping.
28	Check box if the Company is applying for On-Line Leak Sealing.
29	Check box if the Company is applying for Owner/User Repair with Self Inspection
30	Check box if the Company is applying for the Management Program for Safety Relief Valve Service Interval.
31	Check box if the Company is applying for Installation and Operation of Pressure Vessels Per ASME BPVC Section VIII Division 1 Appendix M.
32	Check box if the Company is applying as a Third Party Authorized Inspection Agency.
33	Check appropriate box if the Company is a Trades Association BPV Quality Program Member with MCAO, ORAC, or HRAI. Proof of membership is to be submitted with the application.



Item #	Description
34	For all Companies outside of Ontario, enter the name of the Authorized Inspection Agency.
35	Check the appropriate box to state whether the Company has a signed inspection service agreement with the TSSA.
36	Enter the amount of the deposit submitted with the application.
37	Enter the amount of the deposit submitted with the application, including proof of membership with MCAO, ORAC or HRAI.
38	Enter the amount of the deposit submitted with the application.
39	Enter "0" for the amount submitted, as all modified assessments are billed per the hourly rate of the fee schedule at a 4-hour minimum charge.
40	Enter "0" for the amount submitted, as the Installation and Operation of Pressure Vessels per ASME BPVC Section VIII Division 1, Appendix M and the Management Program for Safety Relief Valve Service Intervals are billed per the hourly rate of the fee schedule.
41	The applicant shall print, sign and date and send the application, fees (if applicable) and other applicable information to the TSSA as stated beside the applicant authorization box.