



Technical Standards and Safety Authority  
 345 Carlingview Drive  
 Toronto, Ontario M9W 6N9  
 Fax: 416.231.4903  
 Customer Service: 1.877.682.8772  
 www.tssa.org

## Boilers, Pressure Vessels and Fittings Design Registration Application for a CRN - **Conventional**

*Technical Standards and Safety Act*  
 Boilers and Pressure Vessels Regulation

**TSSA use only**

Date: \_\_\_\_\_

WO # \_\_\_\_\_

**Prepayment received YES NO**

Date of Application (mm/dd/yyyy):	<input type="checkbox"/> Expedited / Rush Service (additional fees apply)
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**Please indicate the type of design:**

Boiler      Pressure Vessel      Fitting      Heat Exchanger      Other: \_\_\_\_\_

Existing CRN: \_\_\_\_\_ (if applicable)

<b>Section A: Submitter</b> Company Name: _____  Address: _____  City/Town: _____ Province/State: _____ Postal/Zip Code: _____ Country: _____ Telephone: _____ Contact Name: _____ E-mail: _____ Job No./Reference: _____ Drawing/Design No.: _____ _____ _____ Acct/Cust No.: _____	<b>Section B: Invoicee</b> Same as: <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> D Company Name: _____  Address: _____  City/Town: _____ Province/State: _____ Postal/Zip Code: _____ Country: _____ Telephone: _____ Contact Name: _____ E-mail: _____ Purchase Order No.: _____ *New customers/accounts will require: Corporation number/Business Identification Number _____ Acct/Cust No. _____
<b>Section C: Owner of Design/CRN</b> Same as:      A      B      D Full Legal Company Name: _____  Address: _____  City/Town: _____ Province/State: _____ Postal/Zip Code: _____ Country: _____ Telephone: _____ Contact Name: _____ E-mail: _____ Acct/Cust No.: _____	<b>Section D: Manufacturer</b> Same as: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C (If more than one please attach list) Company name: _____  Address: _____  City/Town: _____ Province/State: _____ Postal/Zip Code: _____ Country: _____ Telephone: _____ Fax: _____ Contact Name: _____ E-mail: _____ Acct/Cust No.: _____

*Approvals and Documents will be sent to the Submitter only.*

Please sign and date before returning to TSSA

**Signed:** \_\_\_\_\_ **Date** (mm/dd/yyyy): \_\_\_\_\_

Other Information:

\*Information provided in this application is releasable under the Freedom of Information and Privacy Protection Act and may be disclosed upon request



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### FEES (HST Registration No: 891131369)

Select	Service	Fee Type	Engineering	HST	Total (Including HST)	Total Fees Due
	<b>Province of Ontario Engineering Review of Design Submission</b> (Fees are per application)					
	<b>Registrations (Select only one per Application)</b> (If requesting Expedited Services , complete this section and select Expedited Services below)					
	Fitting (new designs, additional designs to be added to a registration, renewals)	Flat*	\$ 544.00	\$ 70.72	\$ 614.72	
	Pressure Vessel (PV)	Flat*	\$ 518.00	\$ 67.34	\$ 585.34	
	Boiler and Heat Exchanger	Flat*	\$ 687.00	\$ 89.31	\$ 776.31	
	Revisions (Changes to previously registered Fittings, Pressure Vessels & Boilers & Heat Exchangers)	Flat*	\$ 374.00	\$ 48.62	\$ 422.62	
	<b>Expedited Services</b> (invoiced separately at 2 x standard rates)					

<b>Total Fees Due</b>				
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**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**

Please note: During high volume periods, expedited service may be limited or unavailable.

For urgent assistance please contact Boilers and Pressure Vessels (BPV) Engineering at 416-734-3299.

\*Flat fees relating to engineering services or initial inspection may be subject to additional billing if engineering submissions are inadequate or require excessive engineering review/initial inspection time. Additional billing, if any, will be billed in 1/4 hour increments at the applicable hourly labour rate based on TSSA's posted fee schedule. All labour rates are per inspector or engineer.



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## PAYMENT INSTRUCTIONS

<b>TSSA use only</b> WO # _____	L # _____ CH # _____
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If paying by cheque, bank draft, money order or wire transfer, 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](http://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>

**If paying by Cheque, Bank Draft, Money Order or Wire transfer complete the following and select payment method:**

Name of Applicant/Organization:

Telephone No:

Email Address:

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

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

**Wire Transfer**

**Pay to Bank:** TD Canada Trust

**Beneficiary:** Technical Standards and Safety Authority

**Swift:** TDOMCATTOR

**Account:** 05200306317

Please add \$CDN 15.00 to your remittance for bank handling charges for wire transfers. Send a copy of your wire remittance by e-mail to [areceivable@tssa.org](mailto:areceivable@tssa.org) along with a copy of your application.

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