Technical Standards and Safety Authority
345 Carlingview Drive
Toronto, Ontario M9W 6N9
Tel: 416.734.3300
Fax: 416.231.4078
Customer Service: 1.877.682.8772
E-mail: fssubmissions@tssa.org
www.tssa.org

Clear Form

Print Form

Application for Field Approval of Appliances or Equipment

Technical Standards and Safety Act

Fuels Safety Regulations

Please submit completed application and supporting documentation by mail, fax, or email (in pdf format).

For Office Use Only

Check applicable box(es)

- ☐ Digester Gas
- ☐ Fuel Oil
- ☐ Landfill
- ☐ Natural Gas
- ☐ Propane
- ☐ Other _____

Required Documentation (2 copies each)

- ☐ Bill of Materials
- ☐ Purge Calculations
- ☐ Electrical Schematic
- ☐ Valve Train / P&ID Drawing(s)

Type of Appliance/Equipment:	☐ Mobile Appliance
Manufactured by:	No. of Units:
Model:	Serial No.(s):
Main Supply Pressure:	
Maximum Input:	Minimum Input:
Burner/Manifold Operating Pressure:	

A. OWNER OF APPLIANCE OR EQUIPMENT

Company Name:			
Corporation Number/Business Identification Number:			
Street Name / 911 Number/Address, if applicable:			
Unit/Suite:	PO Box:		
City/Town:	Province:	Postal Code:	
Telephone No.:	Fax No.:	Cell No.:	Email:
Print Name of Contact Person:			

B. LOCATION ADDRESS

Same as: ☐ A

(Where appliance/equipment is to be installed/inspected. Note this must be a delivery or fire route address.)

Company Name:			
Street Name / 911 Number/Address, if applicable:			
Unit/Suite:			
City/Town:	Province:	Postal Code:	
Telephone No.:	Fax No.:	Cell No.:	
Email:			
Print Name of Contact Person:			

C. TECHNICAL CONTACT

Same as: ☐ A ☐ B ☐ D

(Company we should communicate with regarding engineering and inspection approval on behalf of the owner.)

Company Name:			
Street Name / 911 Number/Address, if applicable:			
Unit/Suite:	PO Box:		
City/Town:	Province:	Postal Code:	
Telephone No.:	Fax No.:	Cell No.:	
Email:			
Print Name of Contact Person:			

Note: It is illegal to use an appliance, equipment, or work for its intended purpose unless it is approved.
Please note that this approval may be revoked or suspended if the relevant review and inspection fees are not paid in full.

Technical Standards and Safety Authority
345 Carlingview Drive
Toronto, Ontario M9W 6N9
Tel: 416.734.3300
Fax: 416.231.4078
Customer Service: 1.877.682.8772
E-mail: fssubmissions@tssa.org
www.tssa.org

Application for Field Approval of Appliances or Equipment

Technical Standards and Safety Act
Fuels Safety Regulations

Location Address:

D. INVOICEE
(Company responsible for fees invoiced for approval including engineering and inspection fees.)

Company Name:			
Street Name / 911 Number/Address, if applicable:			
Unit/Suite:	PO Box:		
City/Town:		Province:	Postal Code:
Telephone No.:	Fax No.:	Cell No.:	
Email:			
Print Name of Contact Person:	Signature of Contact Person: Please Print & Sign before returning to TSSA		

Date of Application (dd-mmm-yyyy)**:** _____

FEES FOR ENGINEERING REVIEW AND INSPECTION

Check box to request type of service.

☐ **Regular Service:** 20-30 working days for engineering and inspection services.
Standard Fee: $169.50 (13% HST included) per hour for engineering review and inspection services.

☐ **Rush Engineering Service Only:** 5 to 10 working days.
Fee: 2 x Standard fee for engineering review.

☐ **Rush Engineering and Inspection Services:** 5 to 10 working days for each service.
Fee: 2 x Standard fee for engineering review and inspection services.

Legal Disclaimer - The owner agrees to hold harmless the Technical Standards and Safety Authority, its employees, agents, successors and assigns from any and all damages, actions, suits, claims or loss arising from the use, approval or refusal to approve of the appliance, equipment or work to which this approval applies. In the event of claims made against TSSA arising from the use of the appliance, equipment or work the owner accepts, on demand to defend such actions on behalf of TSSA and to assume any costs legal or otherwise for the defence or settlement of such claims. Failure to comply with any of the terms and conditions of the approval voids the approval.

Deposit Payment Method

Deposit of $593.25 (13% HST included) must accompany each application. Invoice will only be issued for the amount billed over and above the deposit.

HST Registration No.: 891131369

Purchase Order No. _____ Purchase Order number will be reflected on invoices and TSSA will not enter into any purchasing agreements.

☐ Cheque or money order enclosed. Please make payable to: **Technical Standards and Safety Authority**

☐ Charge my credit card: ☐ VISA ☐ MASTERCARD

Card No. | | | | | | | | | | | | | | | | |

Expiry Date | Month | Year |

Name of Card Holder _____ Telephone No. _____
First Name *Last Name*

Signature of Card Holder **X** _____ Please Print & Sign before returning to TSSA Date _____
(dd-mmm-yyyy)

Payment Receipts can be requested by calling our Customer Contact Centre at 1.877.682.8772 only after the payment has been processed.