Technical Standards and Safety Authority
345 Carlingview Drive
Toronto, Ontario M9W 6N9
Tel: 416.734.3300
Fax: 416.234.9169
Customer Service: 1.877.682.8772
Email: intake@tssa.org
www.tssa.org

Application for Registration in Ontario as a Contractor

Technical Standards and Safety Act

Clear Form

Print Form

For Office Use Only

Name of Company:	Corp No./Business Identification No.:
Name of Person:	
E-mail:	
Have you been previously registered as a contractor? ☐ Yes Registration No.: _____ ☐ No	

A. Complete Mailing Address

Street No.:	Street Name:	
Unit/Suite:		
City/Town:	Province:	Postal Code:
Telephone No.:	Fax No.:	Cell No.:
If you are a fuels certificate holder, provide the Certificate No.		

B. If your business location address is different from your mailing address, please complete this section.

Street No.:	Street Name:	
Unit/Suite:		
City/Town:	Province:	Postal Code:
Telephone No.:	Fax No.:	Cell No.:

1. **Type(s) of work - Check appropriate box(es)**

a) ☐ Heating Fuels Contractor $478.40 (13% HST Included)
- ☐ Fuel oil
- ☐ Natural Gas
- ☐ Propane Vapour
- ☐ Liquid Propane

b) ☐ Petroleum Contractor $478.40 (13% HST Included)

c) ☐ Natural Gas Motor Fuel $478.40 (13% HST Included)

NOTES

1. It is mandatory to apply for separate registrations, according to the applicant's type of work, classified as a), b), or c).
2. This fee includes pro-rated portion of an audit inspection completed once over a three-year cycle.
3. A contractor pre-registration inspection must be performed and will be billed separately to complete the registration process.

For details on TSSA's fee schedule, please visit **www.tssa.org**

You are required by law to notify TSSA of any change of information.
The information is collected under the authority of Ontario's Technical Standards and Safety Act.

I have read the Act under which I am applying for registration and understand my duties and obligations, as they apply to me and my employees. I certify that the information I have provided in this application is true.

Name of the Owner/Operator (Print)	Signature	Date (dd-mmm-yyyy)
	Please Print & Sign before returning to TSSA	

Payment: Submit fee (non-refundable) for each type of registration. See NOTES section above.

HST Registration No.: 891131369

☐ 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)

FS 09132 (04/17)

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