



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

Application for Reinstatement as an Elevating Devices Contractor

under Ontario's *Technical Standards and Safety Act*
 Elevating Devices Regulation

Indicate if applying for **Multiple Contractor Registration Numbers** and complete page 3 of this application

| | | | |
|--|--|--------------------|----------------------------------|
| Company Corporate Name (Contractor) | | Corporation Number | TSSA Contractor Registration No. |
| Name of Contact | | Telephone Number | E-mail: |
| Business Address: | Street No. | Street Name | |
| Town/City Township/County: | | Province: | Postal Code: |
| Telephone: | Fax: | E-mail : | |
| If operating as a Partnership or Sole Proprietorship, please specify the Name of the Owner | | First Name | Last Name |
| Mailing Address (if different from above): | Street No. | Street Name | |
| Town/City Township/County: | | Province: | Postal Code: |
| Telephone: | Fax: | E-mail: | |
| For targeted electronic mailings, provide contacts as shown: | Please direct any Financial correspondence to the email of: | | |
| | Direct Inspection Reports and Operational & Safety messaging to: | | |

| Contractors must register their scope of work (installation and / or maintenance) for all applicable device classes. Select all that apply. | | | If scope or work is limited* mark here. To be eligible for registration in a specific device class, list one currently qualified mechanic whose scope and experience is applicable to the selected device class. | | |
|--|-----------------|----------------|--|------------------|-----------------|
| Device Class | Installation of | Maintenance of | Name of Qualified Mechanic | Certificate Type | Certificate No. |
| Elevators | | | | | |
| Dumbwaiters | | | | | |
| Escalators | | | | | |
| Moving walks | | | | | |
| Shopping cart conveyors | | | | | |
| Freight platform /Material lift | | | | | |
| Lift for persons w/disabilities | | | | | |
| Manlifts | | | | | |
| Construction Hoists | | | | | |
| Inclined lifts | | | | | |
| Stage lifts | | | | | |
| Parking Garage Lifts | | | | | |
| Passenger Ropeways (Ski Lifts) | | | | | |
| Special Devices <i>specify</i> | | | | | |
| | | | | | |
| | | | | | |

FEES*

| Enter # of Years Operating Without a License | Current Year | Total Years | Contractor Registration (Installation and/or Maintenance) | Fee Type | Fee | Total Years | | Total Fees Due |
|--|--------------|-------------|---|----------|-----------|-------------|---|----------------|
| | | | | | | x | = | |
| | | | 100 or less devices | Flat | \$ 300 | x | = | |
| | | | 101 - 500 devices | Flat | \$ 1,200 | x | = | |
| | | | 501 - 1,000 devices | Flat | \$ 3,000 | x | = | |
| | | | 1,001 - 2,000 devices | Flat | \$ 4,000 | x | = | |
| | | | 2,001 - 3,000 devices | Flat | \$ 5,000 | x | = | |
| | | | 3,001 - 5,000 devices | Flat | \$ 15,000 | x | = | |
| | | | 5,001+ devices | Flat | \$ 25,000 | x | = | |

*Note: Engineering and/or Inspection services may be required to reinstate the license/ registration and will be billed as a separate fee

| | |
|-------------------------------------|--|
| Total Reinstatement Fees Due | |
|-------------------------------------|--|

Value in Box 2 to be entered in TSSA Service Prepayment Portal **2**

Click here to access [TSSA Service Prepayment Portal](#)

All required fees must be prepaid for application to be processed. Fees are non-refundable.

| | |
|--|--|
| ★ If scope is limited, specify limitations here: example (interior cab renovation only) | |
|--|--|

If the selected scope of work includes **Maintenance**, submit a complete listing of all devices currently maintained. Electronic files in excel format must be e-mailed to CustomerManagement@tssa.org .Lists shall be provided with three columns with the following headings

| | | |
|------------------------------------|-------------------------------------|---|
| Contractor Registration No. | ED Installation (Device) No. | Service Contract Expiry Date (mm/dd/yyyy) |
|------------------------------------|-------------------------------------|---|

Applicant's Statement: The undersigned applicant states (on behalf of the company) that:

- His/her company when registered as a contractor will comply with all requirements of the Technical Standards and Safety Act, Elevating Devices Regulation
- His/her company will ensure that all mechanics have access to the latest edition and revision of the code(s) applicable to the elevating devices on which they are assigned to work and that they will have full working knowledge of such codes
- Applicant has self ensured that supervisory staff and listed mechanics have full knowledge of the Technical Standards and Safety Act, Elevating Devices
- This application is a declaration for authorization, knowingly making a false statement or furnishing false information is an offence under section 37 (1)(b) of the Technical Standard and Safety Act, 2000.

| | | | |
|-------------|--------------------------------------|-------------------------|------------------|
| Date | Applicant's Official Capacity | Applicant's Name | Signature |
|-------------|--------------------------------------|-------------------------|------------------|



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Multiple Contractor Registration Number Application Form

All Contractors are required to be registered as per O.Reg 209/01 s.14 and s.21. TSSA issues registered contractors with a contractor registration number. Only **one** registration number is required per contractor, but in some circumstances contractors may elect to obtain additional registration numbers to identify and track activities associated with branch or satellite offices.

Multiple registration numbers can be used for the following purposes:

- TSSA can auto email copies of periodic inspection reports to the maintenance contractor of record. If it is desirable to have inspection report copies sent directly to local branch offices multiple registration numbers are required
- TSSA collects statistics for the purpose of generating contractor ratings (Contractor ratings impact inspection frequencies). Where multiple contractor numbers exist, each contractor number will be assigned a contractor rating
- Multiple contractor numbers permit separated tracking and separated emailing to branch offices.

If contractors are interested in obtaining multiple registration numbers, complete one branch office info section below for each branch office. **Note: A \$300 fee applies for each additional contractor number above and beyond the required main or "parent" number. Branch offices share the same contractor registration categories as those requested for the 'parent' registration. Registration category fees are not charged to branch offices.**

'Parent' Contractor

| | | |
|-------------------------------------|--|----------------------------------|
| Company Corporate Name (Contractor) | Ontario Corporation No., if applicable | TSSA Contractor Registration No. |
|-------------------------------------|--|----------------------------------|

| Branch Office Info | | Request for new branch number | Renewal of existing branch number: |
|----------------------------|------------|--------------------------------|------------------------------------|
| Name of Contact | | Telephone Number | e-mail address |
| Business Address: | Street No. | Street Name | |
| Town/City Township/County: | | Province: | Postal Code: |
| Telephone: | Fax: | e-mail for inspection reports: | |

| Branch Office Info | | Request for new branch number | Renewal of existing branch number: |
|----------------------------|------------|--------------------------------|------------------------------------|
| Name of Contact | | Telephone Number | e-mail address |
| Business Address: | Street No. | Street Name | |
| Town/City Township/County: | | Province: | Postal Code: |
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| Branch Office Info | | Request for new branch number | Renewal of existing branch number: |
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| Branch Office Info | | Request for new branch number | Renewal of existing branch number: |
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