

345 Carlingview Drive Toronto, Ontario M9W 6N9 Tel.: 416.734.3300 Fax: 416.231.1626 Toll Free: 1.877.682.8772

www.tssa.org

January 31, 2023

Renewal: 2023 - 2024

Dear Elevating Device Contractor,

The Technical Standards and Safety Authority (TSSA) is pleased to provide you with this information package to assist you with the renewal of your Contractor Registration for the upcoming renewal period.

TSSA will be transitioning to a new operating system scheduled for March 2023. We appreciate everyone's patience during this transition.

To support this transition, the following changes have been made for this renewal period:

- 1. The expiry date for all active Contractor registrations have been extended to May 31, 2023
- 2. All Renewal applications will be processed after March 1st, 2023, to accommodate our change in operating system
- 3. As such, we have extended the validity period which we will continue to accept and process renewals without penalty to June 1st 2023.

Note: All renewal packages for the 2023-2024 year received complete with pre-payment prior to June 1st 2023, <u>will not</u> qualify as a lapsed authorization."

Please renew on time. You will not be permitted to operate if you do not renew your registration prior to its expiry date. If your authorization expires, TSSA may perform an inspection at a cost to you to verify you are no longer operating.

Important information when completing your initial/renewal package.

Initial/Renewal Package Checklist

To assist you with completing the package, ensure you have:

2. Prepaid registration fee (Note: Renewal fees will no longer be invoiced, and must be prepaid)

3. Submitted Maintenance List (for details see Regulatory Information further below)

Please be advised that missing any requirement from the checklist will cause a delay in processing your request.

Submittal of Initial/Renewal Package

Packages submitted by mail, must be sent to the following address:

Technical Standards and Safety Authority

Attention: Licensing and Registration Team
345 Carlingview Dr. Toronto ON
M9W 6N9

Packages submitted by email, must be sent to licencingandregistration@tssa.org

Fee Payment

Important: Only packages submitted to TSSA's head office at 345 Carlingview Ave, Toronto, ON, M9W6N9 will be processed.

Registration fee must be prepaid using the following options:

- 1. TSSA's online Payment Portal (Payment by Credit Card)
 - By submitting your pre-payment and application at https://forms.tssa.org/Payments/Service-Prepayment-Portal
 - Please reference your account number found on a previous invoice or contact a Customer Service Advisor at 1.877.682.8772 (TSSA)
- 2. Cheque or Money Order
 - By mail to the address shown on the invoice.

REGULATORY INFORMATION

*Maintenance List

Contractors are required to submit a copy of their Maintenance list in MS-Excel format as denoted in the https://www.tssa.org/en/elevating-devices/resources/Documents/Maintenance-List-2015.xlsx

Completed electronic files must be sent by email to licencingandregistration@tssa.org

If you require any further information or have any questions, please contact a Customer ServiceAdvisor at 1.877.682.8772 (TSSA) or customerservices@tssa.org. We will be pleased to assist you.

Yours in Safety,

Simolfinie

Jessica Myrie

Supervisor, Intake and Licensing ServicesTechnical Standards and Safety Authority www.tssa.org



Technical Standards and Safety Authority 345 Carlingview Drive Toronto, Ontario M9W 6N9 Tel: 416.734.3300 Fax: 416.234.9169

Email:licencingandregistration@tssa.org
Customer Service: 1.877.682.8772 www.tssa.org

Application for Registration as an Elevating Devices Evacuation Contractor under Ontario's Technical Standards and Safety Act

Elevating Devices Regulation

Application for:	☐ Initial Con	tractor Regis	stration _]R	enewal	☐ Change of Scope	☐ witl	h limited* scope
TSSA Contracto	r Registration N	No.:		٠				
Company (Owner/O	perator=):							
Corporation No: /Business Identification No:			Name of Contact:					
Bus. Telephone No: Email Add				ddress:				
Please provide con	nplete Mailing add	<u>lress</u> in the fie	lds provided bel	ow	3			
Street No:	Street No: Street Name:			Unit/Suite:				
City/Town:			Province:			Postal/Zip Code:		
Bus. Telephone No:						Fax No:		
If your business lo	cation address is	different from	your mailing ac	ldre	ess, pleas	e complete this section		
Street No:		Street Name:				Unit/Suite:		
City/Town:			Province:			Postal/Zip Code:		
Bus. Telephone No:						Fax No:		
Evacuation Contractors must indicate the address of the device(s) for which employee(s) have been trained to perform rescue operations.				Provide Name(s) of Employee(s) Qualified to perform rescue operations, and date of last training. Record of training must be attached with application.				
Address		ı	Device Installati	on l	Numbers	Name of Emp	loyee	Date of last training
								<u> </u>

FEES

	Registration	Fee		Total
Select		Туре	Fee	Fees Due
	Elevating Devices Evacuation Contractor	Flat	\$ 250	

Total Fees Due	
·	

If paying by credit card, amount in Box 2 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.

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

- His/her company when registered as an evacuation contractor will comply with all requirements of the *Technical Standards and Safety Act*, Elevating Devices Regulation.
- His/her company will ensure that all listed employees have received evacuation training by an accredited training provider and have been instructed in the specific evacuation procedures for the listed installation numbers, and mainatain an up-to-date list of all employees trained including applicable training dates
- His/her company has written operating procedures applicable to rescue operations for each device listed.
- The applicable employee records of training are included with the application.
- 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



PAYMENT INSTRUCTIONS

TSSA use only	L#	CH#	
WO#			

If paying by cheque, bank draft, money order, 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. HST Registration No: 891131369.

Payment Options:

Credit Card - Click link below

TSSA Service Prepayment Portal

https://forms.tssa.org/Payments/Service-Prepayment-Portal

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

Name of Applicant/Organization: Telephone No:	
Email Address:	
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

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