Technical Standards and Safety Authority 345 Carlingview Drive Toronto, Ontario, M9W 6N9 Tel: 416.734.3300 Fax No: 416.234.9169 Customer Service: 1.877.682.8772

Application for Duplicate Certificate of Registration or Name Change of a Plant Technical Standards and Safety Act

Operating Engineers Regulation

Email: operatingengineers@tssa.org

The undersigned user of the indicated plant hereby applies for: Duplicate Certificate of Registration Name Change								
Please refer to OE Plant Re	Please refer to OE Plant Registration Fee Details on Page 2 of the application form:							
Owner/Licensee Inform	nation:	Plant U	Jser Name Type	Person	Busines	ss		
Plant User Name:				Corporation/Business Identification No: (if plant user is Business)				
Pease provide Primary add	I ress in the fields	provided l	pelow					
Street No:	Stree	Name:					Unit/Suite:	
City/Town:			Province:	Postal Code:		Email:		
Primary Phone: Mobile	Business	Hom	e	*			Fax No:	
Primary Contact Information								
Name of Contact:					Email:			
Primary Phone:						'-	Fax No:	
If your mailing address is d	lifferent from yo	ur primary	address, please co	omplete this section			•	
Street No: Street Name:						Unit/Suite:		
City/Town: Province:			Postal Code:		Email:			
Invoicing Option: Mail	☐ Email			_				
2								
Plant Information								
Please provide complete Pla	nt location in the	fields prov	vided below					
Street No: Street	t Name:						Unit/Suite:	
City/Town: Pr		Provi	nce:	Postal/Zip Code:		Email:	Email:	
Bus. Telephone No:				Fax No:				
Plant Known As:			Plant Type Classification:					
Plant Registration Number: Plant Fu			Function:					
Guarded Control: Tes No Guarde			arded Control Tested Date:					
Additional Pre-Requisites		-						
☐ Please attach Plant Equipment List (Link for Plant Equipment List)								
Please attach Risk Safety Mgt Plan (required for Path 2)								
You are required by law to no Safety Act.	otify TSSA of an	y change	of information. The	information is collec	cted under th	e authority of 0	Ontario's Technical Standards and	

Declaration: I have read the Act under which I am applying for Plant Registration and understand my duties and obligations, as they apply to me and my

Applicant's Title:

Date:

Applicant Name: Applicant's Signature

employees. I certify that the information I have provided in this application is true.

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www.tssa.org

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Please provide Plant User Name (must match page 1):	
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PLEASE COMPLETE FOR PAYMENTS:

Select	Service	Fee Type	Fee	Total Fees Due
	Certificate of Registration of a Plant			
	Duplicate Registration or Name Change	Flat	\$ 160.00	

Total Fees Due	
(C)	

2

If paying by credit card, amounts 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



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