



Technical Standards and Safety Authority
345 Carlingview Drive
Toronto, Ontario M9W 6N9
Customer Service: 1.877.682.8772
Fax: 416.734.3568
Email: publicinformationsservices@tssa.org
www.tssa.org

Application for Release of Public Information Issued under the Access and Privacy Code

For Office Use Only

WO No.

A. REQUESTOR INFORMATION

Your File/Reference No: _____ *Date: _____

*Organization Name:			Account Number:		
*Suite/Unit No:	*Street No:	*Street Name:			
*City:		*Province:		*Postal Code:	
*Primary Phone:		Secondary Phone:			
Email:			Fax No:		
*Requestor Name:			*Requestor Email:		
*Requestor Phone:					

B. REQUEST

*PROGRAM(S) TO SEARCH (Please check all that apply):

☐ **BOILERS & PRESSURE VESSELS/OE PLANT** ☐ **ELEVATING/AMUSEMENT DEVICES** ☐ **FUELS**

*SUBJECT ADDRESS TO BE SEARCHED (One Address Per Form):

*Suite/Unit No:	*Street/Lot No:	*Street/Concession Name:			
*City:		*Province:		*Postal Code:	

REASON FOR REQUEST (Please explain the reason for your request):

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DETAILS OF REQUEST (Please list the information you require):

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C. TERMS AND CONDITIONS:

Please refer to the link for our Access and Privacy Code [Access and Privacy Code.pdf](#).

If this request includes a release of personal information, TSSA will require consent from the effected party

*Requestor Signature:	*Date:
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D. FEES & PAYMENT

Expedited (Rush) Service is not available for Public Information requests

If you need assistance in determining the quantity and service type, please contact us at: publicinformationservices@tssa.org before completing this form. TSSA will provide a fee quote for multiple record requests, which must be approved by the Applicant before a record search commences. For fees for single searches, please see below or refer to our [Website Fee Schedule.pdf](#)

Program	Request	FEE TYPE	FEE	HST	# OF TYPE	Total
BPV/OE Boilers Pressure Vessels	<input type="checkbox"/> Confirmation of BPV/OE <i>Includes all available inspections/incidents</i> <i>You will receive No-Record letter if applicable</i>	per Address	50.00	6.50	1	
	<input type="checkbox"/> Copy of CRN Design Submission *Authorization from Design Owner Mandatory CRN #'s: _____	per CRN #	50.00	6.50		
	<input type="checkbox"/> Piping Registration Documents *Authorization from Building Owner Mandatory P #'s: _____	per P #	50.00	6.50		
	<input type="checkbox"/> MDR/U1A Request *Ontario Identification Number Mandatory OIN: _____	per Device	50.00	6.50		
ED/AD Elevating Devices Amusement Devices	<input type="checkbox"/> Copy of latest Inspection Report	per Device	40.00	5.20		
	<input type="checkbox"/> ED/AD Design/Technical Dossier Submission Documents *Authorization from Building Owner Mandatory ED/AD Device #'s: _____	per Device	80.00	10.40		
	<input type="checkbox"/> ED/AD Incident Report ED/AD Device #: _____ Date of Incident: _____ Victim Name (If applicable): _____	per Device	80.00	10.40		
	<input type="checkbox"/> ED/AD Devices status report (6 devices per report) ED/AD Device #'s: _____ _____ _____	Per Report	70.00	9.10		
FS Fuels Safety	<input type="checkbox"/> Archive Search <i>This includes all available inspections/incidents</i> <i>You will receive No-Record letter if applicable</i> Incident Request: Date of Incident: _____ Victim Name (If applicable): _____	per Address	50.00	6.50	1	
OTHER	<input type="checkbox"/> Multiple Records Request *(Non-Refundable Fee to Review)	each	120.00	15.60	1	
	<input type="checkbox"/> Written/Hard Copy Confirmation of Licensing, Certification, Registration	each	50.00	6.50	1	
(HST REGISTRATION NO: 891131369)			Total Fees Due:			
					1	

If paying by credit card, amount in Box 1 to be entered in TSSA Service Prepayment Portal

Authorization Requirements (if required):

- Official letter on company letter head
- Signature, title & full name of individual authorizing release
- Telephone number & email address of individual authorizing release

***Multiple Records are charged by applicable hourly rate. One hour to be paid with the application, and the remaining hours will be invoiced.**



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PAYMENT INSTRUCTIONS

TSSA use only	L #	CH #
WO # _____		

Payment Options:

Credit Card - Click link below

[TSSA Service Prepayment Portal](https://forms.tssa.org/Payments/Service-Prepayment-Portal)

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