How to Create an Organization Account



This guide will provide you with step-by-step instructions on how to create an "Organization Account" in the TSSA Client Portal

Important. If you are acting on behalf of an organization or as a Third-Party representative, a property management company or submitter account must be created.



2 Click the "Create Account" button.

Home Accounts	Applications Invoices			 BPV O	Profile Sign out wner BPV Insurer
Home > Accounts					
Hi David Smith!				Create Account	Link Existing Account
Portal Manager ()					
Aby Shelby	Account Number: 003018036	0 Exams	0 Authorizations	0 Work Orders in Progress	0 Unpaid Invoices

3	Click "Account Type" field and select the "Organization" from the drop-down lis
Home	> Accounts > Create Account
Crea	te a new account
Account	Details Address Contact Details Review
	Please choose one of the following: Organization- Account for the Owner/operator applying for a service with TSSA, i.e. licence, registrations, information request, etc. Individual - Account for the personal certificate holder applying for a TSSA certificate, i.e. Gas Technician. Operating Engineering, etc. Third Party- Account for the Submitter or Property Manager transacting on behalf of a owner/operator for a service with TSSA, i.e. Contractor, Engineering Firm, etc. Create your own Third Party account first, if one does not already exist before transacting on behalf of the owner/operator.
S	Select V Select V Select Organization Individual Third Party Next



Answer, **"Are you acting on behalf of the organization as a Third-Party representative?"** Select **"Yes"** or **"No"**.

choose one of the following:

zation- Account for the Owner/operator applying for a service with TSSA, i.e. licence, registrations, information request, etc.

ual - Account for the personal certificate holder applying for a TSSA certificate, i.e. Gas Technician. Operating Engineering, etc.

arty- Account for the Submitter or Property Manager transacting on behalf of a owner/operator for a service with TSSA, i.e Contractor, Engineering Firm, etc. your own Third Party account first, if one does not already exist before transacting on behalf of the owner/operator.

Account Type*	Are you acting on behalf of the organization as a Third Party representative?*
ation 🗸	Select
" (The full legal name of a business/ organization as per the business registry or first me for a Sole Proprietor)	Select Yes No
me	Select ~
э/Туре*	Other Name (The full legal other name of the business/organization as per the business registry)
ə/Type*	Other Name (The full legal other name of the business/organization as per the business registry) Other Name
e/Type*	Other Name (The full legal other name of the business/organization as per the business registry) Other Name Business Identification Number Expiry Date

If you selected "**Yes**" that you are acting on behalf of an organization as a Third-Party representative, an additional field will appear, "**Are you acting as the**". Select from the drop-down menu, "**Property Management Company**" or "**Submitter**".

Important: A Property management company or Submitter account must be created before moving to the next step.

Select the Account Type*	Are you acting on behalf of the organization a	s a mild rany representative:
Organization	✓ Yes	~
re you acting as the:*	TSSA account number of Third Party*	
Property Management Company	✓ Select Your TSSA Account	~
Select Property Management Company Submitter	• Organization Type*	
Legal Name	Select	~
Other Name/Type*	Other Name (The full legal other name of the registry)	business/organization as per the business
Select usiness Identification Number (The number issued by the Province of Usiness Licence or small business.)	Other Name f Ontario for Master Business Identification Number Expiry Date	
Select Usiness Identification Number (<i>The number issued by the Province of Usiness Licence or small business</i>) Business Identification number Corporation Number (<i>The number assigned to a corporation by the puthority</i>)	Other Name Other Name Business Identification Number Expiry Date MM/DD/YYYY provincial designated	
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Click the **"TSSA account number of the Third Party"** field and select the **TSSA Account** from the drop-down list.

elect the account Type	Are you acting on behalt of the organization as a Third Party representative?"
Organization V	Yes 🗸
vre you acting as the:*	TSSA account number of Third Party*
Property Management Company	Select Your TSSA Account
Select Property Management Company Submitter	Organization Type*
Legal Name	Select
Dther Name/Type*	Other Name (The full legal other name of the business/organization as per the business registry)
Calast	
Select	Other Name
Select Susiness Identification Number (<i>The number issued by the Province of Ontario for Master Susiness Licence or small business</i>) Rusiness Identification number	Other Name Business Identification Number Expiry Date MM/DD/YYYY
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Select Select Business Identification Number (The number issued by the Province of Ontario for Master Business Licence or small business.) Business Identification number Corporation Number (The number assigned to a corporation by the provincial designated authority.) Corporation Number Charity Number (The number assigned to a charity by the CRA when it is registered.) Charity Number SST/HST Number	Other Name Business Identification Number Expiry Date MM/DD/YYYY

7 Enter the name of your organization in the **"Legal Name"** field.

Select the Account Type*	Are you ac representa	ting on behalf of the organization as a Th tive?*	hird Party
Organization	✓ Select		~
egal Name* (The full legal name of a business, pusiness registry or first and last name for a So	(organization as per the Organizati le Proprietor)	on Type*	
Legal Name	Select		~
Other Name/Type*	Other Nam per the bu	ne (The full legal other name of the busine siness registry)	ess/organization as
Colort			
Select	Used by the Province of Business Id	ame	
Select Business Identification Number (<i>The number iss</i> Ontario for Master Business Licence or small bu Business Identification number	Ued by the Province of Business. MM/DD	entification Number Expiry Date	
Select Business Identification Number (<i>The number iss</i> Ontario for Master Business Licence or small bu Business Identification number Corporation Number (<i>The number assigned to</i> provincial designated authority.)	Other N ued by the Province of Business.) MM/DD a corporation by the	entification Number Expiry Date	
Select Business Identification Number (<i>The number iss</i> <i>Ontario for Master Business Licence or small bu</i> Business Identification number Corporation Number (<i>The number assigned to</i> <i>provincial designated authority</i> .) Corporation Number	Other N ued by the Province of Business Id siness.) MM/DD a corporation by the	entification Number Expiry Date	
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8 Click the **"Organization Type"** drop-down list. Select one of the following options:

- Sole Proprietor
- Limited Partnership/Limited Liability Partnership (LLP)
- Corporation
- General Partnership
- Charity
- Foreign Corporation Business
- Cooperative
- None of the Above

Important: Based on the "**Organization Type"** you select, certain fields will become mandatory.

vidual - Account for the personal certificate holder applying for a TSSA certificate. i.e. Gas Technician. Operating Engineering. etc.

rd Party- Account for the Submitter or Property Manager transacting on behalf of a owner/operator for a service with TSSA, i.e Contractor, Engineering Firm	, etc.
ate your own Third Party account first, if one does not already exist before transacting on behalf of the owner/operator.	

he Account Type*	Are you acting on behalf of the organization as a Third Party representative?*	
nization 🗸	Select	~
ame" (The full legal name of a business/ organization as per the business registry or first t name for a Sole Proprietor)	Organization Type*	
Name	Select	~
lame/Type*	Select Sole Proprietor Limited Partnership/ Limited Liability Partnership (LLP)	
r ~	Corporation General Partnership	
s Identification Number (The number issued by the Province of Ontario for Master s Licence or small business.)	Charity Foreign Corporation/Business Cooperative None of the Above	
ess Identification number	MM/DD/YYYY	
ation Number (The number assigned to a corporation by the provincial designated ty.)		
pration Number		

9 Click the "Other Name/Type" field and select one option:

- Operating as
- A Division of
- Doing Business as
- Not applicable

If the organization has another name, click "**Other Name**" and enter it in the field.

Individual - Account for the personal certificate holder applying for a TSSA certificate, i.e. Gas Technician, Operating Engineering, etc.

Select the Account Type*	Are you acting on behalf of the organization as a Third Party representative?*
Organization V	Select
.egol Name" (The full legal name of a business/ organization as per the business registry or firs and last name for a Sole Proprietor)	Corganization Type*
Legal Name	Select
Other Name/Type*	Other Name (The full legal other name of the business/organization as per the business registry)
Select	Other Name
Select Operating as A Division of	Business Identification Number Expiry Date
Not applicable	MM/DD/YYYY
Corporation Number (The number assigned to a corporation by the provincial designated authority.)	
Corporation Number	
Charity Number (The number assigned to a charity by the CRA when it is registered.)	

10 Click "**Next**" to begin entering the "**Address**" details.

Select the Account Type"			Are you acting on behalf of the organization as a Third Party representative?*	
Organization		~	No	~
Legal Name" (The full legal Sole Proprietor)	name of a business/ organization as	per the business registry or first and last name for	a Organization Type*	
Legal Name			Sole Proprietor	~
Other Name/Type*			Other Name* (The full legal other name of the business/organization as per the business registry)	
Operating as		~	XYZ	
Business Identification Numb business.)	ber" (The number issued by the Prov	ince of Ontario for Master Business Licence or sma	# Business Identification Number Expiry Date	
231453			MM/DD/YYYY	
231453 CST/HST Number CST/HST Number		Cancel	MMJDD/YYYY Noxt	

11 Enter your address in the **"Search and Select Address"** field.

If your address cannot be found, manually enter your address in the following fields:

- Street Number or Name
- Country
- Province/State
- City
- Postal/Zip Code

Enter your email address in the "Primary Account Email Address" field.

Accounts Applications Invoices	BPV Owner BPV Insurer
ccounts > Create Account	
eate a new account	
count Details Address Contact Details Review	
Prinary Address (The primary location of the business/organization or for individual account type the primary add Systech and Select Address addresses can be searched and selected. Users also have the ability to edit the address directly on the fields.)	dress as it appears on Government issued (D)
Street Number/Name*	Unit/Suite
Floor Number Country*	
Province/State*	City'
Postol/Zip Code*	Primary Account Email Address
Billing Address (Mailing address to receive invoices, statement of account, etc)	
Same as Primary Address Search and Select Address	

If your **Billing Address** is the same as the primary address, place a checkmark beside "**Same as Primary Address**" or manually enter a different address.

77 Shuter St, Toronto Ontario M5B 0B8		
Addressee		
Select	~	
Street Number/Name*		Unit/Suite
77 Shuter St		
floor Number	PO Box () P.O.Box	
Country*		Province/State*
Canada	~	Ontario
City*		Postol/Zip Code*
Toronto		M5B OB8
Preferred Delivery Method for Billing*		

Select the "Addressee" option if applicable.

13 Click the **"Preferred Delivery Method for Billing"** field and select either **"Email"** or **"Mail"**.

Coards and Solart Address		
77 Shuter St. Toronto Ontario M5B 0B8		
Addressee		
Select	~	
Street Number/Name*		Unit/Suite
77 Shuter St		
Floor Number PO Box PO Box		
Country*		Province/State*
Canada	~	Ontario V
City*		Postal/Zip Code*
Toronto		M5B OB8
Select	×	
Select	Ť	

If your **Shipping Address** is the same as the Billing Address, place a checkmark beside "**Same as Billing Address**" or enter a different address.

Search and Select Address			
77 Shuter St. Toronto Ontario M5B 0B8			
Addressee		Attention To * (Individual recipient of correspondences)	
Select	~		
Street Number/Name		Unit/Suite	
77 Shuter St			
Floor Number	PO Box () PO Box		
Country*		Province/State*	
Canada 🗸		Ontario	
City*		Postal/Zip Code*	

Select the "Addressee" option if applicable.

15 Click the **"Preferred Delivery Method for Shipping"** field and select either the **"Email"** or **"Mail"** option.

Click the "**Next**" button to enter your "**Contact**" details.

Addressee			
Select	~		
Street Number/Name		Unit/Suite	
77 Shuter St			
Floor Number	PO Box () P.O.Box		
Country*		Province/State*	
Canada	~	Ontario	
City'		Postal/Zip Code"	
Toronto		M5B 0B8	
Preferred Delivery Method for Shipping*			
Select	~		
Select Mail Email			

16 Complete the following fields for your "**Primary Contact Details**".

- Primary Account Phone Type
- Country Code
- Primary Account Phone Number

Click the "**Next**" button to review a summary of information.

Create a new account

ccount Details Address Contact Det	ails Review	
Primary Account Phone Type*		
Business	~	
Primary Account Phone Country Code*	Primary Account Phone Number* Primary Account Phone Extention	_
Canada 🗸		
Secondary Account Phone Type Mobile	~	
Secondary Account Phone Country Code	Secondary Account Phone Number Secondary Account Phone Extention	
Canada		
	Cancel Back Next	

17 If changes are required in your summary, click the edit button and make adjustments to your information.

count Details Address	Contact Details	Review		
Account Details			Account Type Organization Legal Name Ameila Brown	Account Name XYZ A Division of Ameila Brown
			Other Name Type A Division of	Other Name XYZ
			Organization Type Sole Proprietor	
			Are you acting on behalf of the organization as a Third Party representative? Yes	Are you acting as the: Property Management Company
			TSSA account number of Third Party IBM O/A IBM LTD - 003019135	GST/HST Number
			Business Identification number PO1234	
Address			Primary Address	Primary Account Email Address abe@gmail.com Edit
			77 Mutual St Toronto ON Canada, M5B 0B9	
			Billing Address	

18 Scroll to the bottom of the page and place a checkbox beside, "I certify that the information I have provided in the form is true".

	Primary Account Phone Country Code Canada		
Upload Document - Con	sent to Grant Third Party Access* Please click here for the form		
Please upload File Formats: JF	a file PEG. PNG, ZIP, PDF	Browse	
L	Certify that the information I have provided in this form is true. Click the Terms of Use to read and accept the conditions for using the TSSA Customer Portal I represent the Property Management Company (I herby attest to my role of Property Management Company user and take all responsibility of the role in accardance with TSSA Portal Policy)		
In some case	Legal Entity details will be validated. ss, TSSA may update the Legal Name based on our verification process or contact you for addi	tional details.	
Ac	count Details cannot be edited after you proceed to Save. Please review and confirm all deto	iils.	
	Cancel Back Save		



	Canada	
pload Document - Consent to Grant Third Part	ty Access [*] Please click here for the form	
Please upload a file File Formats: JPEG, PNG, ZIP, PDF		Browse
	hat the information I have provided in this form is true. Tyrms of the to read and accept the conditions for using the TSSA r Portal ht the Property Management Company test to my role of Property Management Company user and take all ty of the role in accordance with TSSA Portal Policy)	
In some cases, TSSA may update	Legal Entity details will be validated. the Legal Name based on our verification process or contact you for additional	details.
Account Details cannot	be edited after you proceed to Save. Please review and confirm all details.	
	Cancel Back Save	

20 Read and acknowledge the terms by clicking on the "**Accept**" button.

In these Terms were last revised. By continuing to use this Portal after that date, you agree to the changes.	
count. You will be required to register for an account to use the Portal. Your account username may not the name of another person or entity in a manner that may cause confusion. or be offensive, vulgar or 3. Your account username and password are personal to you or your business. You will be responsible for the titulity and use of your username and password, and for all activities and transactions that are conducted your account. You may not transfer or sell access to your account. We will not be liable for any harm related isure of your username or password or the use by anyone else of your username or password. You may not ther user's account without that user's permission except as an authorized third party agent. You will ately notify us in writing if you discover any unauthorized use of your account or other account-related breach. We may require you to change your username and/or password if we believe your account is no ecure or if we receive a complaint that your username violates someone else's rights. You will have no hip in your account or your username. We may refuse registration, cancel an account or deny access to the or any reason.	
ual Property. The Portal and all data, text, designs, pages, print screens, images, artwork, photographs, nd video clips, and HTML code, source code, or software that reside or are viewable or otherwise rable on the Portal (collectively, the "Content") are owned by us. We own a copyright and, in some instances, and other intellectual property in the Portal and Content. We may change the Content and features of the any time. We grant you a limited, conditional, no-cost, non-exclusive, non-transferable, non-sublicensable o view this Portal and is Content as permitted by these Terms	
ed acts and uses. You agree that you will not:	
trict or inhibit any other person from using the Portal;	
Decline	
Company	Survey Stanges
Company News	TSSA
	STETY AUTHORIT

21 If you are acting on behalf of the organization as a **"Property Management Company"** or a **"Submitter"** upload the **"Consent to Grant Third Party Access**" document.

	Canada	
pload Document - Consent to Grant Thirc	I Party Access [*] Please click here for the form	
Rease upload a file File Formats: JPEG, PNG, ZIP, PDF		Browse
Click Cust repr (I hert response	the Terms of Use to read and accept the conditions for using the TSSA orner Portal resent the Property Management Company by attest to my role of Property Management Company user and take all insbility of the role in accordance with TSSA Portal Policy)	
In some cases, TSSA may up	Legal Entity details will be validated. date the Legal Name based on our verification process or contact you for a	dditional details.
Account Details ca	nnot be edited after you proceed to Save. Please review and confirm all d	letails.
	Cancel Back Save	

22 Click t	he " Save " button.			
	Click the Terms of Use to rea Customer Portal	id and accept the condition	is for using the TSSA	
	Application cannot be edited after you pr Cancel	Back	e review and confirm all details.	
wnloads tificates pection Reports ied Orders	Company Company News			
ntact us	Privacy and cookies	Terms of use	TSSA Website	

A green banner will display that the account was created successfully. The newly created account can be viewed under the "Accounts" tab on the portal homepage.

	Primary Account Phone Type Business	Primary Account Phone Number Ed 4377663862				
	Primary Account Phone Country Code Canada					
	Portal Manager First Name David	Portal Manager Last Name Smith				
	Portal Manager Email davidsmithtssa@gmail.com					
×	✓ I certify that the information I have provided in this form is true.					
Click the Terms of Use to read and accept the conditions for using the TSSA Customer Portal						
ccount Creation is successful, please allow 15 min before accessing account information via <u>Accounts</u> and to proceed with Application.						
Application cannot be edited after you proceed to Next stage. Please review and confirm all details.						
	Cancel Back Save					

(i) Congratulations! You have successfully reviewed how to create an "Organization Account" in the TSSA Client Portal.

24 Contact Customer Service at *1-877-682-TSSA* (*8772*) or send an email to <u>customerservices@tssa.org</u> in case of any questions.