



Technical Standards and Safety Authority  
345 Carlingview Drive  
Toronto, Ontario M9W 6N9  
Fax: 416.231.4903  
Customer Service: 1.877.682.8772  
E-mail: certandexams@tssa.org  
www.tssa.org

**Application for National Board Examination and  
Certificate of Competency Examination and Certification**  
**Technical Standards and Safety Act**  
Boilers and Pressure Vessels Regulation

<b>Full Name of Applicant</b> Last Name		First Name	Middle Name
Street No.	Street Name		
City		Province	Postal Code 
Date of Birth: Day   Month   Year	Current Certificate No. (if applicable)	Service Request No. (if applicable)	
Telephone No. Daytime (work)	Cell No.	E-mail	

**Name of Employer**

Street No.	Street Name		
City	Province	Postal Code 	

Please check (✓) appropriate examination: ☐ National Board Exam ☐ Certificate of Competency  
☐ Inservice Commission (IC)  
☐ New Construction "A" Endorsement (Re-write)

NOTE: The National Board requirements must be met before writing the Certificate of Competency Examination.

**FEES**

Select	Service	Fee Type	Exam/ Certificate	Total Fees Due
	National Board Commission Examination	Flat	314.00	
	Competency Examination and Certification processing (Ontario Supplementary Examination - \$128.00 and Certificate of Competence - \$104.50)	Flat	232.50	
	Certification Fee	Flat	104.50	

Total Fees Due		
	2	

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**

If this is a re-write, please indicate how many times. ☐ First ☐ Second ☐ Third ☐ Other: \_\_\_\_\_

Date of Examination/Time: \_\_\_\_\_ (Day) (Month) (Year) Location (City): \_\_\_\_\_

Applicant Name (Please print)	Signature	Date (dd-mmm-yyyy)
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This certification and examination application is valid for a period of 6 months from the above date.

## CERTIFICATE OF COMPETENCY CERTIFICATION

(To be completed by employer for Certificate of Competency Certification only)

Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_

The above named company is submitting this application under the **Technical Standards and Safety Act, 2000**, and the Boilers and Pressure Vessels Regulation for Certificate of Competency Certification for \_\_\_\_\_, to act as a boiler and pressure vessel inspector. Name

Inspector's Home Address: \_\_\_\_\_

We have reviewed the candidate's credentials and confirm that he/she meets the eligibility requirements per Subsection 12 (3) of the Boilers & Pressure Vessels Regulation.

The applicant holds a valid National Board Commission, No. \_\_\_\_\_, issued on \_\_\_\_\_, copy enclosed; or written confirmation of a pass mark in the National Board Examination, copy enclosed. (dd-mmm-yyyy)

In support of this application, we have attached copies of the following documents testifying to the inspector's education and/or experience in accordance with Subsection 12 (4) (c) of the Boilers and Pressure Vessels Regulation.

☐ National Board Examination Confirmation Letter ☐ Resume

### Technical Education (Attach Copies)

School	Location	From	To	Subjects Studied

### Certificates, Diplomas or Degrees Awarded (Attach Copies)

Certificate, Diploma, Degree	Granted By:	Year

**Practical Experience:** give details of relevant technical experience associated with boilers and pressure vessel in the following categories:

- Engineering, design or design registration of boilers or pressure vessels in Canada.
- Manufacturing of boilers or pressure vessels, including fabrication methods or processes in either shop or field.
- Responsible charge in the operation of boilers totalling 50,000 lbs. of steam per hour total capacity.
- Perform NDE examination, repair, alteration or maintenance of boiler or pressure vessels.
- Quality control systems related to boiler or pressure vessel manufacturing, repair or alteration in either shop or field.
- Inspection of boilers or pressure vessels either in-service or during construction including either shop or field.

Type of Experience	From	To	Employer and Position Held

**We declare that, to the best of our knowledge and belief, the statements are accurate and constitute a true record of the Inspector's education and experience.**

Please print.	Signature	Date (dd-mmm-yyyy)
Name of Inspector's Supervisor _____		
Name of Inspector		



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## PAYMENT INSTRUCTIONS

<b>TSSA use only</b> WO # _____	L # _____ CH # _____
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If paying by cheque, bank draft, money order or wire transfer, 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](http://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)**

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

**If paying by Cheque, Bank Draft, Money Order or Wire transfer complete the following and select payment method:**

Name of Applicant/Organization:

Telephone No:

Email Address:

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

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

### **Wire Transfer**

**Pay to Bank:** TD Canada Trust

**Beneficiary:** Technical Standards and Safety Authority

**Swift:** TDOMCATTTOR

**Account:** 05200306317

Please add \$CDN 15.00 to your remittance for bank handling charges for wire transfers. Send a copy of your wire remittance by e-mail to [areceivable@tssa.org](mailto:areceivable@tssa.org) along with a copy of your application.

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