



Technical Standards and Safety Authority
345 Carlingview Drive
Toronto, Ontario M9W 6N9
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: <input type="checkbox"/> Initial Application <input type="checkbox"/> Renewal (Enter TSSA No. Below.) <input type="checkbox"/> Change of Scope (Enter TSSA No. Below.) | | | |
| TSSA Contractor Registration No.: | | | |
| Company (Owner/Operator): | | | |
| Corporation No./Business Identification No: | | Name of Contact: | |
| Bus. Telephone No: | | Email Address: | |
| Please provide complete <u>Mailing address</u> in the fields provided below | | | |
| Street No: | Street Name: | Unit/Suite: | |
| City/Town: | Province: | Postal/Zip Code: | |
| Bus. Telephone No: | | Fax No: | |
| If your business location address is <u>different</u> from your mailing address, please 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 | Device Installation Numbers | Name of Employee | Date of last training |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

FEES

| Select | Registration | Fee Type | Fee | Total Fees Due |
|--------|---|----------|-----------|----------------|
| | Elevating Devices Evacuation Contractor | Flat | \$ 272.50 | |

| | |
|-----------------------|----------|
| 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.

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 maintain 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 |
|------|-------------------------------|------------------|-----------|
|------|-------------------------------|------------------|-----------|



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

PAYMENT INSTRUCTIONS

| | |
|------------------------------------|----------------------|
| TSSA use only WO # _____ | L # _____ CH # _____ |
|------------------------------------|----------------------|

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)

<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:

Attach a copy of Cheque/Bank Draft/Money Order with submissions and send your submission package to eddesignsubmittal@tssa.org

Cheque/Bank Draft/Money Order #: _____

Mail payment along with a copy of this prepayment form 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