



Technical
Standards and
Safety Authority

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Supplementary Report for Elevating Devices for the Handicapped

S

A) Purpose of Report: (check one box)

- ☐ A1 Have an elevating device for persons with disabilities installed, for which a design submission is to be registered with TSSA, or
- ☐ A2 Own a building where an elevating device for persons with disabilities is installed, or
- ☐ A3 Change the type of occupancy of the building in which an elevating device for persons with disabilities is installed.

B) Owner: (Name and address of the owner of the elevating device for persons with disabilities that is (or is to be) installed.)

Name

Street No.

Street Name, P.O. Box No., etc.

Town / City or Township / County

Province

Postal Code

C) Elevating Device and Building: (If A1 checked - answer C1, C2 & C3, If A2 or A3 checked - answer C1 & C4)

- ☐ C1 Elevating Device CLASS: ☐ 13 stair chair lift ☐ 14 stair platform lift-Type C (enclosed) ☐ 15 stair platform lift-Type D (unenclosed) ☐ 16 vertical platform lift-Type C (enclosed) ☐ 17 vertical platform lift-Type D (unenclosed)

Name of lift manufacturer

☐ C2

The address of the building where the lift is to be installed
Street No. Street Name, P.O. Box No., etc.

☐ C3

Town / City or Township / County

Province

Postal Code

Installation Number(s) shown on the plate(s) attached to the lift(s):

☐ C4

D) Building Function: (check one or more boxes as applicable)

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> D1 Residential (rental) | <input type="checkbox"/> D8 Assemblies (theatre, gallery, museum, school, auditorium, restaurant, rink, opera house, indoor recreation facility, community hall, observation tower, bowling alley, library, place of worship) | <input type="checkbox"/> D11 Office (with restricted public access) | <input type="checkbox"/> D16 Other Functions |
| <input type="checkbox"/> D2 Residence (condominium) | | <input type="checkbox"/> D12 Mercantile (store, supermarket, shopping mall) | |
| <input type="checkbox"/> D3 Student Residence | | <input type="checkbox"/> D13 Industrial (factory, mill, warehouse) | |
| <input type="checkbox"/> D4 Group Home | | <input type="checkbox"/> D14 Mass Transportation (rail, subway station, parking garage, airport terminal) | |
| <input type="checkbox"/> D5 Hotel (hostel, motel) | <input type="checkbox"/> D9 Learning Institution (school, college, day care centre, nursery school) | <input type="checkbox"/> D15 Outdoor Recreational Area (ski area, golf course, park) | |
| <input type="checkbox"/> D6 Hospital (nursing home, orphanage) | <input type="checkbox"/> D10 Office (open to the public e.g. postal, professional office, bank) | | |
| <input type="checkbox"/> D7 Institutions (correctional centre, jail, psychiatric hospital) | | | |

E) Building Accessibility: (check one box)

- ☐ E1 Yes or ☐ E2 No

Will the members of the general public, including persons with disabilities, have **unrestricted access*** to at least one level of the building section (e.g. wing, corridor, staircase) where the lift is, or is to be, installed.

*"unrestricted access" means without being admitted to and/escorted by a permanent resident or a building staff member, or without pre-registration or enrolment or a similar mandatory act which would give the owner an opportunity to instruct, in writing or verbally, each individual person, before entering the building section, of the hazards, if any, involved with the use and/or operation of the lift indicated in "C".

F) Use of the Lift: (check one box)

If "F2", specify other uses and frequency:

The lift will be used: ☐ F1 Solely or ☐ F2 Primarily for the transportation of persons with disabilities.

G) Method of Usage: (check one box)(not applicable to class 13) The persons with disabilities will be transported by the lift

- ☐ G1 only if seated in a wheelchair, or ☐ G2 regardless of whether standing or sitting in a wheelchair.

H) Capacity of the Lift: (check one box, according to data indicated in design submission or in the licence)

- ☐ H1 This lift is designed to carry max. of TWO PERSONS at a time. It can be used by a person with disabilities alone or accompanied by an attendant, or
- ☐ H2 This lift is of "class 14" or "class 16" or "class 17" having travel in excess of 2m and since it is designed to carry ONLY ONE PERSON at a time it can be operated only by persons who meet the requirements quoted in "J 2" and "J 3" below, or
- ☐ H3 This lift is of "class 13" or "class 15" or "class 17" having travel of 2m or less and regardless of its capacity, it can be operated only by the person with disabilities or an attendant.

I) Means of Restricting Use of Operating Devices: (check one box)

The use of operating devices shall be (is) restricted to authorized person(s) (see J2 below) by:

☐ **I2** The following method:

☐ **I1** means of "key-control" conforming to Ontario's Regulation, or,

J) Owner's Responsibilities: (check ALL boxes) The owner shall ensure that,

- ☐ **J1** The lift is used solely or primarily (as included in "F" above) for the transportation of persons with disabilities, and
- ☐ **J2** The operation of the lift is restricted to attendants designated by the owner or persons with disabilities who in the opinion of the owner are able to use the lift without an attendant, and
- ☐ **J3** The persons using the lift receive instructions and training that emphasizes the hazards associated with improper use of the lift (both for persons ON and IN THE VICINITY of the device), and
- ☐ **J4** An attendant is available to operate the lift when persons with disabilities not designated by the owner as in "J 2" require use of the lift, and
- ☐ **J5** A notice, restricting the use of the lift to the persons with disabilities, is posted at each location of the lift, at landing or runway entrances of the lift and at the load carrying unit of the lift.

Note: For additional owner's responsibilities, relevant to particular elevating device classes, please check sections "K" and "L".

K) Owner's Responsibilities: and Restrictions Relevant to Class 13, 15 and 17

(check **ONE** of the following boxes if the subject of this report is lift designated in "C1" above as "Class 13, 15 or 17" otherwise disregard this part)

☐ **K1** The owner shall ensure that:

a) the public does not have access to the area* where the lift is installed while the lift is in operation, which is achieved by using the following method:

☐ **K2** The owner is able to control and identify persons who will be using the lift or the area where the lift is installed and to familiarize those persons in advance with safety rules and procedures.

Furthermore:

- a) while the lift is being operated at the same time that the other persons who are using the area in which the lift is installed, audio-visual signals shall be emitted that can be heard by persons in the area where the lift is installed until the lift is parked in a safe position at a terminal, and
- b) every leading edge or surface of that portion of the lift and its carriage that carries the passengers in both directions of travel shall be equipped with sensitive devices in conformance with applicable CSA codes and that are operational whenever the carriage is in motion, and
- c) the designated attendant, while operating the lift in the folded down position, must have continuously clear vision of the lift in the direction of its movement while the carriage is in motion, and
- d) the person using the lift must have a clear view of the lift runway in the direction of travel while using the lift, and
- e) a notice shall be posted at the entrance to the elevating device that cautions the user to observe the lift runway for possible obstructions, and
- f) where a full view of the entire lift runway is restricted from a location of operating devices, a notice shall indicate that the operation of a folded down carriage is not permitted from that location.

*e.g. the corridor, staircase, lobby, etc.

L) Owner's Signature

☐ **L1** The signatory's official capacity with the owner's company

☐ **L2** Name (Please print)

☐ **L3** Signature

☐ **L4** Date