Technical Standards and Safety Authority 345 Carlingview Drive Toronto, Ontario M9W 6N9 Tel: 416.734.3300 Fax: 416.234.9169 Customer Service: 1.877.682.8772 Email: customermanagement@tssa.org

Application for Reinstatement of an Ontario Licence to Operate a Propane Cylinder Handling Facility

Technical Standards and Safety Act Propane Storage and Handling Regulation

Email: Customermanagementigitssa.org www.issa.org www.issa.org www.issa.org www.issa.org www.issa.org idlid municipal approval letter issued by the local municipal planning department. Invite stere to the fire department (inviting them on to the site). Submit payment along with this ompleted application, municipal letter, and proof of invitation to the fire department. Was this facility previously licensed under the Act?	Customer Service: 1.877.682.8772						
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Licence Number A. LICENCE HOLDER INFORMATION Person or Company Name: Corporation Number/Business Identification Number: Street Name / 911 Number/Address, if applicable: Jult/Suite: PO Box: Province: Postal Code: Pelephone No.: Print Name of Contact Person: Signature of Contact Person: Street Name / 911 Number/Address, if applicable: Jult/Suite: Po Box: Province: Postal Code: Postal Code: Person or Company Name: Street Name / 911 Number/Address, if applicable: Jult/Suite: Person or Company Name: Province: Province: Province: Province: Province: Province: Province: Province: Postal Code: Postal Code: Cell No.:		•					
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Person or Company Name: Corporation Number/Business Identification Number:	if yes, provide name of previous owner						
Corporation Number/Business Identification Number: Street Name / 911 Number/Address, if applicable: Unit/Suite: PO Box: Province: Postal Code: Telephone No.: Fax No.: Cell No.: Signature of Contact Person: B. FACILITY LOCATION (Note this must be a delivery or fire route address.) Person or Company Name: Street Name / 911 Number/Address, if applicable: Unit/Suite: City/Town: Province: Province: Province: Province: Province: Province: Postal Code: Cell No.: Fax No.: Cell No.: Company Name:	A. LICENCE HOLDER INFORMATION						
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City/Town: Fax No.: Cell No.: Signature of Contact Person: Sig	Street Name / 911 Number/Address, if applicable:						
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Felephone No.: Cell No.:	Unit/Suite: PO Box: City/Town:	Province:		Postal Code:			
			Cell No.:	Postal Code:			
The state of the s	City/Town:		Cell No.:	Postal Code:			

Note: It is illegal to use an appliance, equipment, or work for its intended purpose unless it is approved. Please note that this approval may be revoked or suspended if the relevant review and inspection fees are not paid in full.

Print Name of Contact Person:

TSSA

Facility Address:

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Application for Reinstatement of an Ontario Licence to Operate a Propane Cylinder Handling Facility

Technical Standards and Safety ActPropane Storage and Handling Regulation

D. INVOICEE Same as: A (Person or Company responsible for fees invoiced for approval including engineering and inspection fees.)												
Person or Compa	ıny Name:											
Street Name / 911 Number/Address, if applicable:												
Unit/Suite:				PO Box:								
City/Town:					Province	:		Postal Code:				
Telephone No.:				Fax No.:		С	Cell No.:					
E-mail:												
Print Name of Co	ntact Person:				Signature of C	Contact Per	son:					
Date of Application (dd-mm-yyyyy): FEES* (HST Registration No: 891131369)												
Enter # of Years Operating Without A License	Current Year	Total Years		License		Fee Type	License Fee		Total Years		Total Fees Due	
				Cylinder Handling		Flat*	\$ 213.00	Х		=		

All required fees must be prepaid for application to be processed. Fees are non-refundable.

Value in Box 2 to be entered in TSSA Service Prepayment Portal

Click here to access TSSA Service Prepayment Portal

Total Reinstatement Fees Due

*Note: Engineering and/or Inspection services may be required to reinstate the license/ registration and will be billed as a separate fee

*Flat fees relating to engineering services or initial inspection may be subject to additional billing if engineering submissions are inadequate or require excessive engineering review/initial inspection time. Additional billing, if any, will be billed in 1/4 hour increments at the applicable hourly labour rate based on TSSA's posted fee schedule. All labour rates are per inspector or engineer.

All additional follow-up inspections are billed in accordance with the TSSA fee schedule.

Legal Disclaimer - The owner agrees to hold harmless the Technical Standards and Safety Authority, its employees, agents, successors and assigns from any and all damages, actions, suits, claims or loss arising from the use, approval or refusal to approve of the appliance, equipment or work to which this approval applies. In the event of claims made against TSSA arising from the use of the appliance, equipment or work the owner accepts, on demand to defend such actions on behalf of TSSA and to assume any costs legal or otherwise for the defence or settlement of such claims. Failure to comply with any of the terms and conditions of the approval voids the approval.

FORM #: FS-043-v2