



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: [licensingandregistration@tssa.org](mailto:licensingandregistration@tssa.org)  
[www.tssa.org](http://www.tssa.org)

# Application for Modification or Change of Steel - Propane Container Refill Centre or a Filling Plant

*Technical Standards and Safety Act  
 Propane Storage and Handling Regulation*

|  |   |   |  |  |
|--|---|---|--|--|
| Please submit completed application and supporting documentation by mail, fax, or e-mail (in pdf format).<br>Making a false statement may result in a fine or prosecution.   | For Office Use Only   |   |  |  |
| <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">           Check applicable box(es)<br/> <input type="checkbox"/> Modification<br/> <input type="checkbox"/> Change of Steel         </td> <td style="width:33%; border: none; text-align: center;"> <b>Container Refill Centre</b><br/> <input type="checkbox"/> Cylinder Fill<br/> <input type="checkbox"/> Motor Fill         </td> <td style="width:33%; border: none; text-align: center;"> <input type="checkbox"/> Filling Plant         </td> </tr> </table> | Check applicable box(es)<br><input type="checkbox"/> Modification<br><input type="checkbox"/> Change of Steel   | <b>Container Refill Centre</b><br><input type="checkbox"/> Cylinder Fill<br><input type="checkbox"/> Motor Fill | <input type="checkbox"/> Filling Plant |  |
| Check applicable box(es)<br><input type="checkbox"/> Modification<br><input type="checkbox"/> Change of Steel  | <b>Container Refill Centre</b><br><input type="checkbox"/> Cylinder Fill<br><input type="checkbox"/> Motor Fill | <input type="checkbox"/> Filling Plant  |  |  |
| Mail payment along with completed application form and supporting documents. For a list of supporting documents, please see the Fuels Safety Propane Advisory FS-188-11 on our website: <a href="http://www.tssa.org">www.tssa.org</a>   |   |   |  |  |

|   |                |   |
|---|----------------|---|
| Was this facility previously licensed under the Act? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If 'yes', provide name of previous owner | Licence Number | Total Storage Capacity<br>In U.S. Water Gallons |
|---|----------------|---|

|  |           |                              |  |
|--|-----------|------------------------------|--|
| <b>A. LICENCE HOLDER INFORMATION</b>             |           |                              |  |
| Person or Company Name:                          |           | Corporation Number           |  |
| Street Name / 911 Number/Address, if applicable: |           |                              |  |
| Unit/Suite:                                      | PO Box:   |                              |  |
| City/Town:                                       | Province: | Postal Code:                 |  |
| Telephone No.:                                   | Fax No.:  | Cell No.:                    |  |
| E-mail:  |           |                              |  |
| Print Name of Contact Person:                    |           | Signature of Contact Person: |  |

|  |           |              |  |
|--|-----------|--------------|--|
| <b>B. FACILITY LOCATION</b> Same as: <input type="checkbox"/> A<br>(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: | Postal Code: |  |
| Telephone No.:   | Fax No.:  | Cell No.:    |  |
| E-mail:  |           |              |  |
| Print Name of Contact Person:  |           |              |  |

|   |           |              |  |
|---|-----------|--------------|--|
| <b>C. TECHNICAL CONTACT</b> Same as: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> D<br>(Person or Company we should communicate with regarding engineering and inspection approval on behalf of the owner.) |           |              |  |
| Person or Company Name:   |           |              |  |
| Street Name / 911 Number/Address, if applicable:  |           |              |  |
| Unit/Suite:   | PO Box:   |              |  |
| City/Town:  | Province: | Postal Code: |  |
| Telephone No.:  | Fax No.:  | Cell No.:    |  |
| E-mail:   |           |              |  |
| Print Name of Contact Person:   |           |              |  |

**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.**



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Facility Address:

**D. INVOICEE**

Same as:  A

(Person or Company responsible for fees invoiced for approval including engineering and inspection fees.)

Person or Company Name:

Street Name / 911 Number/Address, if applicable:

Unit/Suite:

PO Box:

City/Town:

Province:

Postal Code:

Telephone No.:

Fax No.:

Cell No.:

E-mail:

Print Name of Contact Person:

Signature of Contact Person:

Date of Application (dd-mm-yyyy): \_\_\_\_\_

### FEES

(HST Registration No: 891131369)

| Select | Service   | Fee Type | Service Fee | HST on Service Fee | Total (Including HST) | Total Fees Due |
|--------|---|----------|-------------|--------------------|-----------------------|----------------|
|        | <b>MODIFICATION</b>   |          |             |                    |                       |                |
|        | <b>Bulk Plant &amp; Fill Sites</b><br>(includes engineering, RSMP, initial inspection, 1 follow-up and travel)  |          |             |                    |                       |                |
|        | <b>L1, &lt;5,000 Gallons</b><br>(up to 6 engineering hours and 7 inspection hours included)   | Minimum* | \$ 1,921.00 | \$ 249.73          | \$ 2,170.73           |                |
|        | <b>L2, &gt;=5,000 Gallons</b><br>(up to 10 engineering hours and 7 inspection hours included)   | Minimum* | \$ 2,667.50 | \$ 346.78          | \$ 3,014.28           |                |
|        | <b>All other facility types</b><br>(includes engineering, initial inspection, 1 follow-up and travel) - up to 3.75 engineering hrs and 7.25 inspection hrs included | Minimum* | \$ 1,600.50 | \$ 208.07          | \$ 1,808.57           |                |
|        | <b>Change of Steel</b><br>(up to 4 engineering hours and 1 inspection hour included)  | Minimum* | \$ 821.50   | \$ 106.80          | \$ 928.30             |                |
|        | <b>Expedited Services**</b>   |          |             |                    |                       |                |
|        | <b>Expedited Engineering Services</b><br>(Additional charge to engineering review per site application)   | Flat     | \$ 533.50   | \$ 69.36           | \$ 602.86             |                |
|        | <b>Expedited Inspection Service</b> (invoiced separately at 2 x standard rates)   |          |             |                    |                       |                |

|                       |  |  |  |  |
|-----------------------|--|--|--|--|
| <b>Total Fees Due</b> |  |  |  |  |
|-----------------------|--|--|--|--|

**1**

If paying by credit card, amount in Box 1 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**

\*All minimum fees include specified hours. Excess time above the specified included hours will be billed at the applicable hourly labour rate in ¼ hour increments. All labour rates are per inspector or engineer.

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

**\*\*Expedited Services**

Expedited service fees are non-refundable

Expedited services places your application in an expedited service line.

Expedited inspection services (inspection & travel time included in the minimum fee, plus any excess hours) will be billed at 2 x the standard inspection rate

**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.



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## PAYMENT INSTRUCTIONS

|                                    |                         |
|------------------------------------|-------------------------|
| <b>TSSA use only</b><br>WO # _____ | L # _____<br>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](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>

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

Name of Applicant/Organization:

Telephone No:

Email Address:

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

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