



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: propane@tssa.org
 www.tssa.org

Application for Reinstatement of an Ontario Licence to Operate a Propane Container Refill Centre or a Filling Plant

Technical Standards and Safety Act
 Propane Storage and Handling Regulation

	For Office Use Only						
Check applicable box(es) <table style="margin-left: 100px;"> <tr> <td style="text-align: center;">Container Refill Centre</td> <td style="text-align: center;"><input type="checkbox"/> Filling Plant</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> Cylinder Fill</td> <td></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> Motor Fill</td> <td></td> </tr> </table>	Container Refill Centre	<input type="checkbox"/> Filling Plant	<input type="checkbox"/> Cylinder Fill		<input type="checkbox"/> Motor Fill		
Container Refill Centre	<input type="checkbox"/> Filling Plant						
<input type="checkbox"/> Cylinder Fill							
<input type="checkbox"/> Motor Fill							

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

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. FACILITY LOCATION Same as: A

(Note this must be a delivery or fire route address.)

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:			

C. TECHNICAL CONTACT Same as: A B D

(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.



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

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)

Enter # of years operating without a Registration	Current Year	Total Years	Service	Fee Type	License Fee	Total Years	Total Fees Due
			Bulk Plant & Fill Sites				
			L1, <5,000 Gallons	Flat	\$ 858.00	x	=
			L2, >=5,000 Gallons				
			5,001 - 6,000 U.S. water gallons	Flat	\$ 858.00	x	=
			6,001 - 22,000 U.S. water gallons	Flat	\$ 3,203.00	x	=
			22,001 - 40,000 U.S. water gallons	Flat	\$ 4,357.50	x	=
			40,001 - 52,000 U.S. water gallons	Flat	\$ 6,406.50	x	=
			52,001 - 66,000 U.S. water gallons	Flat	\$ 8,330.50	x	=
			66,001 - 99,000 U.S. water gallons	Flat	\$ 11,658.50	x	=
			99,001 - 132,000 U.S. water gallons	Flat	\$ 15,371.00	x	=
			132,001 - 264,000 U.S. water gallons	Flat	\$ 28,184.00	x	=
			264,001 - 396,000 U.S. water gallons	Flat	\$ 40,991.50	x	=
			Greater than 396,000 U.S. water gallons	Flat	\$ 69,357.50	x	=

Total Reinstatement Fees Due		
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Value in Box 2 to be entered in TSSA Service Prepayment Portal

2

Click here to access [TSSA Service Prepayment Portal](#)

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

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

*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 and 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

TSSA use only	L #	CH #
WO # _____		

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:

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