



Technical Standards and Safety Authority
 345 Carlingview Drive
 Toronto, Ontario M9W 6N9
 Fax: 416.734.3202
 Customer Service: 1.877.682.8772
 Email: propanelicensing@tssa.org
 www.tssa.org

**Application for Renewal of
 Level 2 Propane Licence
 Technical Standards and Safety Act
 Propane Storage and Handling Regulation**

For Office Use Only

**Failure to fully complete this form may result in rejection.
 Making a false statement may result in a fine or prosecution
 under the *Technical Standards and Safety Act*.**

Licence Number

NOTE: If there have been changes to your facility as outlined in Part 5 of the Fuels Safety Advisory FS-188-11, please submit a full Risk and Safety Management Plan (RSMP), otherwise complete sections A or B below, as applicable, and then proceed to complete pages 2 and 3 of this package.

DECLARATIONS

SECTION A: To be completed by a person authorized to bind the corporation/licensee if there are no changes or changes only to telephone numbers, contact names or addresses (not including the facility location).

I hereby declare that I have completed my annual review and the RSMP has not changed since it was last accepted by TSSA.

Print Name

Signature

OR

I hereby declare that I have completed my annual review and the RSMP has not changed other than telephone numbers, contact names or addresses (not including facility location). Please attach copies of the updated RSMP pages with this renewal application.

SECTION B: To be completed by a professional engineer if there are any changes involving the four elements below.

I hereby declare that there have been changes to the RSMP since it was last accepted by TSSA and the following applies:

1. Hazard Analysis

Check appropriate boxes.

- a) These changes would not affect the hazard analysis as per O. Reg. 211/01 3.1 (0.2) (1) 1; **or**
- b) These changes do affect the hazard analysis as per O. Reg. 211/01 3.1 (0.2) (1) 1 and we have enclosed those changes.

2. Risk Assessment

- a) These changes would not affect the risk assessment as per O. Reg. 211/01 3.1 (0.2) (1) 2; **or**
- b) These changes do affect the risk assessment as per O. Reg. 211/01 3.1 (0.2) (1) 2 and we have enclosed those changes.

3. Risk Mitigation

- a) These changes would not affect the risk mitigation as per O. Reg. 211/01 3.1 (0.2) (1) 3; **or**
- b) These changes do affect the risk mitigation as per O. Reg. 211/01 3.1 (0.2) (1) 3 and we have enclosed those changes.

4. Emergency Response and Preparedness Plan

- a) These changes would not affect the Emergency Response and Preparedness Plan as per O. Reg. 211/01 3.1 (0.2) (1) 4; **or**
- b) These changes do affect the Emergency Response and Preparedness Plan as per O. Reg. 211/01 3.1 (0.2) (1) 4 and we have enclosed those changes.

Print Name of Reviewing P. Eng. _____ Signature _____

- I hereby declare:
- that I have provided an updated plan (i.e. this renewal package) to the Fire Services responsible for the area.
 - that the annual emergency management procedures training as per O.Reg 211/01 (Sec 5 (3)) has taken place for facility key contact, staff and certificate holders/persons with Record of Training (ROT).
 - that the facility carries commercial general liability insurance as required by O. Reg. 197/14 and I have provided an original Certificate of Insurance in an approved format as evidence thereof.

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Print Name	Signature	Date (dd-mmm-yyyy)
Name of person authorized to bind the corporation/licensee _____		



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GENERAL INFORMATION

The Undersigned applies to TSSA for a renewal under Ontario's *Technical Standards and Safety Act*,
 Propane Storage and Handling Regulation.

Company Name _____ Corporation No. _____

Operator Name (if different from above) _____

Telephone No. _____ Fax No. _____ E-mail _____

Street No. _____ Street Name / 911 Number / Address, if applicable _____ Nearest Major Intersection _____

Town / City or Township / County _____ Province _____ Postal Code _____

Mailing address (if different from above)

Street No. _____ Street Name / 911 Number / Address, if applicable _____

Town / City or Township / County _____ Province _____ Postal Code _____

Information on Container Refill Centre or Filling Plant

Location of facility (if different from above)

Street No. _____ Street Name / 911 Number / Address, if applicable _____ Nearest Major Intersection _____

Town / City or Township / County _____ Province _____ Postal Code _____

Supplier

Street No. _____ Street Name / 911 Number / Address, if applicable _____

Town / City or Township / County _____ Province _____ Postal Code _____

Facility Contact Personnel - Key Contact

Name _____ Official Title _____

Telephone No. _____ Fax No. _____ E-mail _____

Role and responsibilities in emergency. _____

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Print name of person completing this form.		Official Title
Signature	Telephone No.	Date (dd-mmm-yyyy)



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CAPACITY INFORMATION

A. Fixed Tanks

PSIG	Serial Number	Capacity
Tank 1: _____	_____	_____
Tank 2: _____	_____	_____
Tank 3: _____	_____	_____
Total Fixed Capacity:		_____

B. Portable Storage

Cylinder Size	Capacity in USWG	Quantity	Total Capacity in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75		
# 33.3	9.62		
# 30	8.8		
# 20	5.8		
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity		Line A	

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Capacity in USWG
Total Tank Capacity		Line B

Total Portable Capacity. Line A plus Line B: _____

C. Mobile Tanks

Type	Tank Size In USWG	Quantity	Total Capacity in USWG
Tankers			
Cargo Liners			
Rail Tank Cars			
Total Mobile Tank Capacity			

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

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Print name of person completing this form.		Official Title
Signature	Telephone No.	Date (dd-mmm-yyyy)



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Off-site Cylinder and/or Mobile Storage		Capacity stored off-site, in USWG	For Office Use - Party No.	
Street No.	Street Name / 911 Number / Address, if applicable			
Town / City or Township / Country			Province	Postal Code
Telephone No.	Fax No.	Contact Name		

Note: Customer storage is not considered off-site storage.

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Record of Training Confirmation and Designation Form

Technical Standards and Safety Act

To be completed by an applicant for a propane license or propane license renewal:

Name of Company:	Corporation No./ Business Identification No:
Name of Applicant:	
Email:	

A. Complete Mailing Address			
Street No.:	Street Name:		
Unit/Suite:			
City/Town:		Province:	Postal Code:
Telephone No.:	Fax No.:	Cell No.:	

B. If your service address is different from your mailing address, please complete this section.			
Street No.:	Street Name:		
Unit/Suite:			
City/Town:		Province:	Postal Code:
Telephone No.:	Fax No.:	Cell No.:	

Pursuant to section 27.1(3) and (4) of the Propane Storage and Handling Regulation (O. Reg. 211/01), I confirm that the Record of Training [ROT] holder indicated below holds an appropriate ROT as is required for the referenced facility and is an officer or director, partner, or a person in senior management designated by me as responsible for the oversight of the propane operations to which the license applies:

Licence No.: _____

Name: _____

Position Title: _____

ROT Certificate No. (copy attached): _____

Applicant Name:	Applicant's Title
Applicant's Signature	Date



REQUIREMENTS FOR RENEWING A PROPANE LICENCE

A licence holder must submit the propane licence renewal application and all other pre-requisites before the expiry date to keep the licence valid. All fees and documentation are due by the licence expiry date.

As TSSA's average turnaround time for processing renewals is 10 business days, please ensure that you allow sufficient time for processing licence renewal applications.

Propane licence renewal invoices are generated 60 days before the licence expiry date. Please submit payment and all mandatory pre-requisites before the licence expires to avoid the **late fee charges** and/or **issuance of Shutdown order**.

Renewal Package Checklist

Check that you have included the following documents in your renewal package:

Completed Application for Renewal of Level 1 Propane License form
(it is mandatory to complete Page 1 and Page 2 if there is no change noted on Page 1)

or

Completed Application for Renewal of level 2 Propane License form
(it is mandatory to complete Page 1 to 4)

Paid Propane Renewal Invoice

Record of Training Confirmation and Designation Form including:

- a Record of Training Confirmation and Designation Form (included in this package) must be submitted;
- and**
- a photocopy of both sides of the ROT's valid ROT wallet card.

Certificate of Insurance

Please be advised that missing any requirement from the checklist will cause a delay in processing your request.

Application Submission

Completed application form and all other mandatory documents must be submitted by email to propanelicensing@tssa.org

Fee Payment

Renewal Invoice sent separately by mail or email; or to access your account, invoice/s and pay invoice/s, visit the [TSSA Client Portal](#)



REQUIREMENTS FOR RENEWING A PROPANE LICENCE

INFORMATION ON INSURANCE DOCUMENTATION

Proof of Insurance: Effective January 1, 2016 Ontario Regulation 197/14 (Liability Insurance for Propane Operators) requires that propane facilities requiring an RSMP must maintain commercial general liability coverage as follows:

Propane Facility	Minimum amount of insurance in CAD
A facility for which the operator is required to have a Level 1 risk and safety management plan under Ontario Regulation 211/01 _____	\$1,000,000 per occurrence
A facility for which the operator is required to have a Level 2 risk and safety management plan under Ontario Regulation 211/01 _____	\$5,000,000 per occurrence

As evidence of insurance, applications for licences for the above types of propane facilities must submit an original Certificate of Insurance in Acord or CSIO form. This must indicate that the facility carries at least the minimum required amount of commercial general liability insurance.

Any changes made to your application that involves a change of insurance coverage below the required amounts must be relayed to TSSA, in accordance with the regulation.

For questions about TSSA licensing requirements, status of submitted applications and RSMPs, please call **416.734.3587** or toll-free **1.855.734.3587**.