



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

**Application for Registration as an Elevating Devices General Contractor**  
 under Ontario's *Technical Standards and Safety Act*  
 Elevating Devices Regulation

<b>Application for:</b> <input type="checkbox"/> Initial Application <input type="checkbox"/> Renewal (Enter TSSA No. Below) <input type="checkbox"/> Scope Change (Enter TSSA No. Below) <b>(Must Check one)</b>			
<b>TSSA Contractor Registration No.:</b>			
<b>Company (Owner/Operator):</b>			
Corporation No./Business Identification No:		Name of Contact:	
Bus. Telephone No:		Email Address:	
Please provide complete <b>Mailing address</b> in the fields provided below			
Street No:	Street Name:	Unit/Suite:	
City/Town:		Province:	Postal/Zip Code:
Bus. Telephone No:		Fax No:	
If your business location address is <b>different</b> from your mailing address, please complete this section			
Street No:	Street Name:	Unit/Suite:	
City/Town:		Province:	Postal/Zip Code:
Bus. Telephone No:		Fax No:	

Contractors must register their <b>scope of work (installation and / or maintenance)</b> for all applicable device classes. Select all that apply.			To be eligible for registration in a specific device class, list one currently qualified mechanic whose scope and experience is applicable to the selected device class.		
Device Class	Installation of	Maintenance of	Name of Qualified Mechanic	Certificate Type	Certificate No.
<b>Class 1: Elevators</b>					
Freight elevators					
Freight elevators - P					
Hand-powered freight elevators					
Observation elevators					
Passenger elevators					
Sidewalk elevators					
Temporary elevators					
Limited use/limited application elevators					
<b>Class 2: Dumbwaiters</b>					
Dumbwaiters (not hand-powered)					
Hand-powered dumbwaiters					
<b>Class 3: Escalators</b>					
Escalators					

Device Class	Installation of	Maintenance of	Name of Qualified Mechanic	Certificate Type	Certificate No.
<b>Class 4: Moving Walkways</b>					
Moving walkways					
<b>Class 4.1: Shopping Cart Conveyors</b>					
Shopping cart conveyors					
<b>Class 5: Freight Platform Lifts</b>					
Freight platform / Material L – Lift Type A					
Freight platform / Material L – Lift Type B					
<b>Class 6: Lifts for persons with physical disabilities</b>					
Stair chair lifts					
Enclosed stair platform lifts					
Unenclosed stair platform lifts					
Enclosed vertical platform lifts					
Unenclosed vertical platform lifts					
<b>Class 7: Manlifts</b>					
Counter-balanced manlifts					
Endless belt manlifts					
Power type manlifts					
<b>Class 9: Construction Hoists</b>					
Material construction hoists					
Workers' rail guided hoists					
Workers' rope-guided hoists					
<b>Class 10: Incline Lifts</b>					
Inclined elevators					
Inclined dumbwaiters					
Inclined manlifts					
Inclined construction hoists					
Inclined freight platforms					
Funicular railways					
<b>Class 10: Funicular</b>					
Funicular Railways (designed under a passenger ropeway code)					
<b>Class 11: Stage Lifts</b>					
Stage lifts					
<b>Class 12: Special Elevating Devices</b>					
Special elevating devices					
Transport Platforms					
<b>Class 13: Parking Garage Lifts</b>					
Parking Garage Lifts					
<b>Class 14: Wind Turbine Tower Elevators</b>					
Wind Turbine Tower Elevators					

## FEES

Select	Contractor Registration (Installation and/or Maintenance)	Fee Type	Fee	Total Fees Due
	100 or less devices	Flat	315.00	
	101 - 500 devices	Flat	1,260.00	
	501 - 1,000 devices	Flat	3,150.00	
	1,001 - 2,000 devices	Flat	4,200.00	
	2,001 - 3,000 devices	Flat	5,250.00	
	3,001 - 5,000 devices	Flat	15,750.00	
	5,001+ devices	Flat	26,250.00	

Total Fees Due	<b>2</b>
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If paying by credit card, amount in Box 2 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.**

If the selected scope of work includes **Maintenance**, submit a complete listing of all devices currently maintained. Electronic files in excel format [ED Maintenance List Template](#) must be e-mailed to [licencingandregistration@tssa.org](mailto:licencingandregistration@tssa.org)

**Applicant's Statement:** The undersigned applicant states (on behalf of the company) that:

- His/her company when registered as an owner contractor will comply with all requirements of the *Technical Standards and Safety Act*, Elevating Devices Regulation.
- His/her company will ensure that all mechanics have access to the latest edition and revision of the code(s) applicable to the elevating devices on which they are assigned to work and that they will have full working knowledge of such codes
- Applicant has self ensured that supervisory staff and listed mechanics have full knowledge of the *Technical Standards and Safety Act*, Elevating Devices
- This application is a declaration for authorization, knowingly making a false statement or furnishing false information is an offence under section 37 (1)(b) of the Technical Standard and Safety Act, 2000.

Date	Applicant's Official Capacity	Applicant's Name	Signature



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## PAYMENT INSTRUCTIONS

<b>TSSA use only</b>	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](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:

Attach a copy of Cheque/Bank Draft/Money Order with submissions and send your submission package to [eddesignsubmittal@tssa.org](mailto:eddesignsubmittal@tssa.org)

Cheque/Bank Draft/Money Order #: \_\_\_\_\_

**Mail payment along with a copy of this prepayment form 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