

345 Carlingview Drive Toronto, Ontario Tel: (416) 734-3300 www.tssa.org

Form Revision: August 11, 2023

Application for Filing of

Aging Ski-Lift Periodic Engineering Review and Assessment

10	Submitter's Name								
11	Address								
12	Telephone								
13	Email								
14	Submitters Specification No.								
15	Installation No.								
16	Address of Installation								
17	No. of Years since start-up								
18	Aging Ski-Lift Assessment #								
19	Any variance(s) proposed?								
20	Engineer who prepared the assessment								
21	Engineer's Employer								
22	Engineer's Address								
23	Telephone								
24	Email								
25	The undersigned attests on behalf of the Company/ Owner that he/she will comply with the requirements of the certified engineering review and assessment report to achieve compliance with the requirements of the Aging Ski Lift Assessment section in Part 5 of the CAD under the Elevating Devices Regulation.								
26	Official Capacity in Company								
27	Name								
28	Signature								
29	Date								
30	Filing Fee	Refer to Fee Schedule							
31	Priority Service Requested?								

Document Transmittal

Supporting Documents: List all documents included as part of this submission									
Document Name			Date		cument Revision	No. of Pages			
Additional Pages Required? Y/N		If yes, list how many pages attached:			Total no. of pa	ges			
141 Professional Engineer	r's Stateme	nt		·	142 P.Eng. Stamp, S	Signature & Date			
thereby certify that this engineering review and assessment report has been prepared in accordance with the requirements of Director's Order 224/07-r2 and/or its latest revisions.									