

Suite 600 - 2889 East 12th Avenue Vancouver BC, V5M 4T5 www.technicalsafetybc.ca

Toll Free: 1 866 566 7233

Qualified Professional Declaration (CRN/PRN/BCLD)

Compliance Declaration:

Project Name:

Date:

To be completed by a Registered Professional Engineer <u>or</u> identify the qualifications of the declarer that establish their suitability for making the following declaration:

By signing this declaration, I declare the following:

- 1.I am the Registered Professional of Record or the Qualified Person identified below;
- 2. The submitted design, to the best of my knowledge, is safe for construction and use;
- 3.The submitted design, to the best of my knowledge, complies with CSA B51 and all other relevant codes and standards adopted by the Regulation;
- 4.The submitted design has been prepared by directly me, under my direct supervision and/or been reviewed directly by me;
- 5.I have the skill and experience necessary to design and evaluate compliance with the identified standards;
- 6.The submitted design, to the best of my knowledge, complies with the Safety Standards Act and Regulations;
- 7.The submitted design, to the best of my knowledge, complies with all applicable safety orders and directives and I have read the following information bulletins:
 - a.IB-BP-2014-02 Changes to Technical Safety BC Application Process
 - b.IB-BP-2016-02 Design Registration Process Improvements
- 8.I acknowledge that making a false declaration may be subject to enforcement by either Technical Safety BC, your professional license-issuing body and/or other applicable bodies.
- 9.I am aware that this declaration encompasses the original submitted design as well as any subsequent modifications made to the design until the registration of said design.
- 10.I acknowledge that Technical Safety BC retains the right to, at its sole discretion, perform an audit on the registration at any point in the future. If the registration is found to be defective in any detail, the registration may be revoked.

Applicant Company Name:	
Please complete EITHER section A or B below:	
A. To be completed by the Professional Engineer: Name: Registration number: Issuing Organization: Phone number:	B. To be completed by non-Professional Engineer: Name: Title: Signature: List qualifications of the person identified above in the box below, or alternatively, attach documents which support qualifications.
P.Eng Seal Signature	