

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

Elevating Devices Regulation

Application for: 🔲 Initial A	pplication	Renewal (Enter	TSSA No	. Below) 🔲 Change of Scope (Enter TSSA No. Below)		
TSSA Contractor Registratio	n No.:					
Company (Owner/Operator):						
Corporation No: /Business Identification No:			Name of Contact:			
Bus. Telephone No:		Email Ac	Address:			
Please provide complete Mailing a	ddress in the fie	lds provided below	á -			
Street No:	Street Name:	Street Name:		Unit/Suite:		
City/Town:	Town: Province:		-	Postal/Zip Code:		
Bus. Telephone No:				Fax No:		
If your business location address	If your business location address is different from your mailing address, please complete this section					
Street No:	Street Name:			Unit/Suite:		
City/Town:	City/Town: Province:			Postal/Zip Code:		
Bus. Telephone No:				Fax No:		

Consultants <i>(contractors)</i> must reg for all applicable device classes. S				
Device Class	Consultation Related to	Name of Qualified Mechanic	Certificate Type	Certificate No.
Class 1: Elevators				
Freight elevators				
Freight elevators - P				
Hand-powered freight elevators				
Observation elevators				
Passenger elevators				
Sidewalk elevators				
Temporary elevators				
Limited use/limited application elevators				
Class 2: Dumbwaiters				
Dumbwaiters				
(not hand-powered)				
Hand-powered dumbwaiters				
Class 3: Escalators				
Escalators				

		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	Consultation Related to	Name of Qualified Mechanic	Certificate Type	Certificate No.	
Class 4: Moving Walkways					
Moving walkways					
Class 4.1: Shopping Cart Conveyors					
Shopping cart conveyors					
Class 5: Freight Platform					
Lifts					
Freight platform / Material L – Lift Type A					
Freight platform / Material L – Lift Type B					
Class 6: Lifts for persons with physical disabilities					
Stair chair lifts					
Enclosed stair platform lifts				1	
Unenclosed stair platform					
lifts					
Enclosed vertical platform lifts					
Unenclosed vertical platform					
lifts					
Special elevating devices					
Class 7: Manlifts					
Counter-balanced manlifts Endless belt manlifts					
Power type manlifts					
Class 9: Construction Hoists					
Material construction hoists					
Workers' rail guided hoists					
Workers' rope-guided hoists					
Class 10: Incline Lifts					
Inclined elevators					
Inclined dumbwaiters					
Inclined manlifts					
Inclined construction hoists					
Inclined freight platforms					
Funicular railways				I	
Class 10: Funicular Funicular Railways (designed					
under a passenger ropeway code)					
Class 11: Stage Lifts					
Stage lifts					
Class 12: Special Elevating					
Devices					
Special elevating devices					
Class 13: Parking Garage Lifts					
Parking Garage Lifts					
Class 14: Wind Turbine					
Tower Elevators Wind Turbine Elevators				1	

FEES

Select	Registration	Fee Type	Fee	Total Fees Due
	Elevating Devices Consultant (Contractor)	Flat	\$ 272.50	
		Total Fee	Total Fees Due	

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.

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

•His/her company when registered as a consultant (contractor) will comply with all requirements of the Technical Standards and Safety Act, Elevating Devices Regulation

•His/her company will ensure that all mechanics or engineers 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, listed mechanics or engineers 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

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

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

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