



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

Request for Relocation of an Elevating Device Licence

Technical Standards and Safety Act
 Elevating Devices Regulations

Company Name:	
Address:	
Telephone No.:	Fax No.:
E-mail:	

Installation numbers:

Building address:

The proposed remote location:

FEES (HST Registration No: 891131369)

Select	Service	Fee	Total Fees Due
	Request for Relocation of an Elevating Device Licence	\$ 70	

Total Fees Due		2
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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

 Date Name Signature

Please note: A confirmation letter will be sent to the submitter upon processing.



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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)

<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:

Cheque/Bank Draft/Money Order #: _____

Mail payment along with a copy of your application 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