

**PASSENGER ROPEWAYS INSTALLATION PERMIT
 LETTER OF APPLICATION FORM**

Payment Card Industry Data Security Standards prevent the use of credit card information sent through email or fax. A Client Service Representative will contact you within three business days to complete any payment process required.

Note: Any personal information collected is handled in accordance with the British Columbia *Freedom and Protection of Privacy Act*. If you have questions about the collection, use, or disclosure of this information, contact the Records, Information and Privacy Analyst for Technical Safety BC at 1-866-566-7233.

UNIT NUMBER:

A: PERMIT INFORMATION				
Permit Type: PR - Installation		Work Class: (check one box only) <input type="checkbox"/> Alteration <input type="checkbox"/> New Installation		
B: CONTACT INFORMATION (Please PRINT Clearly)				
Applicant Name: <small>Licensed Contractor</small>		Installing Contractor:		
Contractor License Number:		Installing Contractor Number:		
Applicant email address:		Preferred method of contact: <input type="checkbox"/> Email <input type="checkbox"/> Mail		
C: SITE INFORMATION (Location of work)				
Unit or Suite No.	Civic No.:	Street Name:	Street Type:	Street Direction: N S E W
City:		Province:	Postal Code:	
D: ADDITIONAL INSTALLATION INFORMATION				
Installation Name:		Contractor Purchase Order No:		
Site Contact:		Site Contact Cell #:		
Specific On-Site Location Details:				
Occupancy Type: <input type="checkbox"/> Industrial <input type="checkbox"/> Public Assembly – Ski Area <input type="checkbox"/> Public Assembly		Alteration Type: (check one box only) <input type="checkbox"/> Major Alteration* <input type="checkbox"/> Minor Alteration* (*Note: Please include a letter of intent to describe proposed alteration)		
Ropeways Unit Class: (Choose One)				
<input type="checkbox"/> Bi-Cable Ropeway	<input type="checkbox"/> Industrial Ropeway	<input type="checkbox"/> Surface T-Bar		
<input type="checkbox"/> Detachable Chairlift	<input type="checkbox"/> Passenger Conveyor	<input type="checkbox"/> Tow Handle		
<input type="checkbox"/> Detachable Gondola	<input type="checkbox"/> Reversible Double	<input type="checkbox"/> Tow Rope		
<input type="checkbox"/> Fixed Chairlift	<input type="checkbox"/> Reversible Self Powered	<input type="checkbox"/> Tow Wire		
<input type="checkbox"/> Fixed Gondola	<input type="checkbox"/> Reversible Single	<input type="checkbox"/> Tri-Cable Ropeway		
	<input type="checkbox"/> Surface Platter	<input type="checkbox"/> Tube Tow		
Unit Name:		Manufacturer:		
Horizontal Length:		Vertical Rise:		
Ropeway: <input type="checkbox"/> New <input type="checkbox"/> Relocated				
The following documents must be included with this application. (See EDSR Section 31) Please check the appropriate boxes to indicate the document is attached.				
<input type="checkbox"/> Location Plan & Profile	<input type="checkbox"/> Route Map	<input type="checkbox"/> Proof of Ownership of, or permission to use, the land that a passenger ropeway will operate on is attached.		
I certify that the device conforms to the Safety Standards Act and Regulations				
Company Officer's Name:		Phone No.		
<input type="checkbox"/> Checking this box and submitting this form to Technical Safety BC via email constitutes your authorization. This has the same effect as submitting a handwritten signature.				
Company Officer's Signature:		Date of Application:		
E: FEE DECLARATION: (Refer to Technical Safety BC Website for current fee schedule at www.technicalsaftybc.ca) GST #: 87391 2802 RT0001				
Installation Fee:		Design Fee:		
Re-inspection fees may be assessed when an inspection of a previous non-compliance is performed and/or when the number of inspections included in the permit fee has been exceeded (minimum 1 hour). Please ensure an inspection request is submitted.				

Technical Safety BC is working towards going paperless! Participate by signing up for email correspondence.