

**SAFETY ORDER RESPONSE FORM
(Passenger Ropeways)**

The information on this form is collected to administer the provisions of the *Safety Standards Act* and section 26 of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, use, or disclosure of this information, contact the Records, Information and Privacy Analyst for the Technical Safety BC at 1 866 566 7233.

The company and/or designated representative in receipt of a safety order must fill out and submit this form to the Technical Safety BC within the timeframe stipulated on the safety order.

Safety Order No: _____

Operating Company Name: _____

The following have been completed as required in the above safety order:

Completion Date: _____

Name of Person signifying completion of safety order requirement/s: _____

Position Title: _____

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.

Signature:	Date:
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Return this form to: passengerropeways@technicalsaftybc.ca