

Safety Manager Review Request 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: 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 questions about the collection, use, or disclosure of this information, contacts the Records, Information & Privacy Analyst at 1-866-566-7233.

Tracking No: _____

A. TECHNOLOGY

Amusement Rides
 Boiler
 Electrical
 Elevating
 Gas
 Passenger Ropeways

B. REQUESTOR INFORMATION

Requestor Name:		
Address:		
City:	Province:	Postal Code:
Telephone: ()	Fax: ()	
Email:		
Indicate preferred method of receiving correspondence: <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> E-Mail		

For office use:

Date Received at Technical Safety BC:

Date of Post Mark:

C. TYPE OF DECISION

Indicate the type of decision for which you are requesting a review:	
<input type="checkbox"/> Certificate of Inspection <input type="checkbox"/> Compliance Order <input type="checkbox"/> Revoke or Suspend Permit <input type="checkbox"/> Other _____ (Provide explanation for other decision)	
A copy of the decision that is being reviewed must be attached.	
Name of the Safety Officer that issued the decision:	Date decision was made:

D. REASON FOR REQUEST *(If more space is needed, please attach a separate sheet including any documentation that will support your request.)*

Request: <i>(provide details)</i>
Reason/s for request:
Codes, Standards or other resources supporting request:

Note: Where the request for review is from another person other than the one that was served the decision, a detailed explanation of how the decision has adversely impacted the requestor must be included above.

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: _____

Please submit to the attention of the appropriate Safety Manager.

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