



ELECTRICAL CONTRACTOR NOTICE OF CHANGE OF FIELD SAFETY REPRESENTATIVE

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: Technical Safety BC collects your personal information for the purpose of administering permits and other activities under the Safety Standards Act and may need to disclose this information to entities such as utilities, provincial agencies and municipalities. By submitting this form you are consenting to the disclosure described above. 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 the Technical Safety BC at 1-866-566-7233..

Table with 2 columns: The fee for replacement card(s) is waived if the Electrical Contractor attaches this notice to their Electrical Contractor Renewal Notice Reminder. Replacement Fee: \$

For completion by company representative:

Electrical contractor's Licence No.: \_\_\_\_\_

Business Name: \_\_\_\_\_

Mailing Address: Suite/Unit No. Street No. Street Name Street Type

City: Province: Postal Code:

Phone: Fax:

I, \_\_\_\_\_ request the following change of Field Safety Representative (FSR) be made effective as of:
Authorized Company Representative - Print

YYYY MM DD

Table with 3 columns: Delete Field Safety Representative, FSR Class(es), FSR Registration Number

Table with 3 columns: Add Field Safety Representative, FSR Class(es), FSR Registration Number

I have read and understood my duties, requirements and restrictions under the Safety Standards Act, Safety Standards General Regulation and the Electrical Safety Regulation as a licenced electrical contractor. I have confirmed that the Field Safety Representative (FSR) to be named on this licence is employed or contracted by me to be the designated FSR on this licence.. I have further confirmed that the named FSR is registered as a Field Safety Representative and holds a valid and subsisting FSR Certificate of Qualification with the class(es) as noted.

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 Authorized Company Representative Dated: YYYY MM DD