

NOTE: We require the fully completed application form, accompanied by the fee, in order to issue the licence.

ACCEPTANCE REPORT NO. _____

OWNER NO. _____ **LICENCE NO.** _____

(For Authority Use)

Application for Personnel Hoist Licence

Every person, firm or corporation having responsibility for the operation of a Workman's Hoist shall make application for an annual licence as required under Section 23 of The Regulations Respecting Elevators and Elevating Conveyances for each unit to be operated in the ensuing year. This licence shall be valid for the twelve months next, following the date on which it was granted or renewed, unless sooner suspended, cancelled or the location changed.

Owner _____

(NOTE: When a "Management Company" OR someone other than the owner, is looking after the owner's affairs, indicate mailing address as: "c/o Name of Managing Company, then mailing address".)

Mailing Address of where Licences/Renewals are to be sent _____

Town/City/Prov. _____ **Postal Code** _____

Contact Person _____ **Phone #** _____ **Fax #** _____

(to whom Licences/Renewals should be sent) **Email** _____

Name of Building
that Elevator is situated in: _____

Physical Address: **AND** _____

Town/City/First Nation
where Conveyance is situated: _____

Capacity: (Passenger) _____ **Capacity: (Weight)** _____ **lbs. Size of Car:** _____ x _____ x _____
(Square Feet)

Make remittance payable to Technical Safety Authority of Saskatchewan and return with completed application form to:

Personnel Hoist\$ 168.00

Technical Safety Authority of Saskatchewan
Elevator Licensing
Room 330, 1855 Victoria Avenue
REGINA SK S4P 3T2

Signature of Applicant

Fee Enclosed \$ _____