



Technical Standards and Safety Authority  
 345 Carlingview Drive  
 Toronto, Ontario M9W 6N9  
 Tel: 416.734.3300  
 Fax: 416-734-3202  
 Email: [licensingandregistration@tssa.org](mailto:licensingandregistration@tssa.org)  
 Customer Service: 1.877.682.8772  
[www.tssa.org](http://www.tssa.org)

# Application for New Amusement Device Business License (ADL)

Issued Under Ontario's **Technical Standards and Safety Act**  
 Amusement Devices Regulations

**Section A:** Please note that it is mandatory to complete all parts of the section listed below

|  |                |   |  |
|--|----------------|---|--|
| Company (Applying for Licence):  |                | Corporation No./Business Identification No: |  |
| Name of Contact:   | Bus. Phone No: | Cell Phone No:                              |  |
| Email Address:   |                | Fax No:                                     |  |
| <b>Please provide complete <u>Mailing address</u> in the fields provided below</b> |                |   |  |
| Street No:   | Street Name:   | City/Town:                                  |  |
| Province/State:  | Country:       | Postal/Zip Code:                            |  |

**Section B:** Please note that it is mandatory to complete all parts of the section listed below:

| <b>Classes of Amusement Devices to be operated, erected &amp; maintained and Company's Activities</b>  |               |                             |                                    |                     |                    |
|--|---------------|-----------------------------|------------------------------------|---------------------|--------------------|
| The mechanic (s) listed below can maintain or erect (as specified) each amusement device operated by the licensee and have knowledge of the <b>Technical Standards and Safety Act</b> , Amusement Devices Regulations, and Codes applicable to the work they perform |               |                             |                                    |                     |                    |
| Classes of Amusement Devices   | Mechanic Name | Mechanic Certificate Number | Check all that apply               |                     | Mechanic Signature |
|  |               |                             | Staff (employee of license holder) | Contracted Mechanic |                    |
| Amusement Rides  |               |                             |                                    |                     |                    |
| Go- Karts  |               |                             |                                    |                     |                    |
| Water Slides   |               |                             |                                    |                     |                    |
| Bungee Jumping   |               |                             |                                    |                     |                    |
| Inflatable   |               |                             |                                    |                     |                    |
| Zip Line   |               |                             |                                    |                     |                    |
| Others (example; stimulator, free fall descending)   |               |                             |                                    |                     |                    |

**Section C: Declaration of Mechanic for Amusement Devices** (Please note that it is mandatory to complete all parts of the section listed below)

The Applicant/Licensee hereby states that "The Mechanic (by signing Section B), confirms that he/she is either directly employed with the licensee or is under contract with the licensee to erect and maintain the amusement devices operated by the Applicant/Licensee, pursuant to O.Reg.221/101, section 5(2)(b). The agreement is valid for the renewal season."

Applicant's Name: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

**Operating Schedule**

As per O.Reg 249/00 s.6(4), owners are required to submit a copy of their [Operating Schedule](#) (to the extent known) by email to [adoperatingschedules@tssa.org](mailto:adoperatingschedules@tssa.org) or to be made available to the inspector upon request. [Approved Amusement Devices Operating Schedule Template](#)

I am authorized to execute this form on behalf of the above noted company and understand my obligation as it relates to O.Reg 221/01 s.5 (3).

\_\_\_\_\_  
 Date (dd-mmm-yyyy)                      Applicant's Official Title                      Applicant's Name                      Signature



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**Section D:** Please note that it is mandatory to complete all parts of the section listed below

| Declaration of Applicant   | Applicant's Signature   |
|--|---|
| <p><b>The applicant, authorized by the Company, confirms that</b></p> <p>(a) The officials designated have full knowledge of the Technical Standards and Safety Act, Amusement Devices Regulations and the Code Adoption Document.</p> <p>(b) Relative to O. Reg 221/01 s.5 (3) which states, every person who carries on the business of operating amusement devices shall obtain and maintain liability insurance in respect of the business in the amount not less than \$2,000,000 per occurrence with a carrier licensed in Ontario and/or Canada</p> <p style="padding-left: 40px;">A public liability policy has been procured in respect of the business.<br/>         The limit of liability on the policy is a minimum of \$2M per occurrence.<br/>         The public liability policy was purchased from an insurance company that is licensed under the Insurance Act and is therefore subject to OSFI regulations.<br/>         The policy has been endorsed with a 30-day notice of cancellations clause.<br/>         An original Certificate of Insurance is attached and forms part of this application.</p> | <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> |
| <p><b>If a licence is granted the licensee shall:</b></p> <p>(a) Ensure that no erection or maintenance is performed unless the work is performed by a Mechanic or a Mechanic in Training under the supervision of a mechanic and that no mechanic is assigned work beyond the scope of his/her experience and training as stated in the Regulations.</p> <p>(b) Ensure that the erection, operation and maintenance of each amusement device operated by the licensee is carried out in accordance with the Technical Standards and Safety Act, Amusement Devices Regulations, and the Code Adoption Document</p>   | <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> |

**Section E: Fees**

| Select | Service                   | Fee Type | Fee    | Total Fees Due |
|--------|---------------------------|----------|--------|----------------|
|        | Business License (annual) | Flat     | \$ 342 |                |

|                       |  |
|-----------------------|--|
| <b>Total Fees Due</b> |  |
|-----------------------|--|

**2**

**If paying by credit card, amount in Box 2 to be entered in TSSA Service Prepayment Portal**

**All required fees must be prepaid for application to be processed.**  
**Fees are non-refundable.**  
**For payment options, see Payment Instructions**



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## PAYMENT INSTRUCTIONS

|                      |     |      |
|----------------------|-----|------|
| <b>TSSA use only</b> | L # | CH # |
| WO # _____           |     |      |

If paying by cheque, bank draft, money order, this form must accompany all applications submitted to TSSA. A separate payment form is required for each application. Please refer to our fee schedule posted on our website [www.tssa.org](http://www.tssa.org). HST Registration No: 891131369.

### Payment Options:

**Credit Card - Click link below**

[TSSA Service Prepayment Portal](#)

### Cheque, Bank Draft or Money Order (payable to Technical Standards and Safety Authority)

Name of Applicant/Organization:

Telephone No:

Email Address:

Cheque/Bank Draft/Money Order #: \_\_\_\_\_

### Mail payment along with a copy of your application to:

Attention: Accounts Receivable  
 Technical Standards and Safety Authority  
 345 Carlingview Drive  
 Toronto, Ontario M9W 6N9

If a copy of the application is not submitted with your payment, this will delay the processing of the application.

Dishonored Payments: A \$35 administration fee will apply for each returned item