



Company (Applicant) Name: \_\_\_\_\_

Corp No. or Business ID No: \_\_\_\_\_ TSSA Account No: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Company Contact Name (Billing): \_\_\_\_\_ Email: \_\_\_\_\_

Company Contact Name (Quality Program): \_\_\_\_\_ Email: \_\_\_\_\_

**Billing/Mailing Address:**

Street No: \_\_\_\_\_ Street Name: \_\_\_\_\_ Unit/Suite: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province/State: \_\_\_\_\_ Postal/ZIP Code: \_\_\_\_\_ Country: \_\_\_\_\_

Department/Division: \_\_\_\_\_

**Facility Address:**  Same as billing/mailling address

|   |  |   |
|---|--|---|
| <b>Nuclear Class:</b><br>(Check all applicable) | CSA N285.0:<br><input type="checkbox"/> 1 <input type="checkbox"/> 1C <input type="checkbox"/> 2 <input type="checkbox"/> 2C <input type="checkbox"/> 3 <input type="checkbox"/> 3C <input type="checkbox"/> 4 | High Temperature Reactors – Metallic Components:<br><input type="checkbox"/> Class A <input type="checkbox"/> Class B <input type="checkbox"/> Class SM |
|---|--|---|

**Code Effective Date:** CSA N285.0 Edition \_\_\_\_\_ Update \_\_\_\_\_ and/or ASME Edition \_\_\_\_\_ Addenda \_\_\_\_\_

|   |   |
|---|---|
| <b>This application is for:</b><br>(Check all applicable) | <input type="checkbox"/> Shop <input type="checkbox"/> Field (CNSC Licensed Sites) <input type="checkbox"/> New Certificate <input type="checkbox"/> Renewal Certificate<br><input type="checkbox"/> Additional Location(s) with Code Activity (all current locations to be listed on page 3) |
|---|---|

If renewal: Current Certificate number(s): \_\_\_\_\_

Expiration date(s): \_\_\_\_\_

**Type of Certificate of Authorization for which application is being made (check all applicable):**

| Nuclear Certificate Type   | Certificate Scopes  |
|--|---|
| <input type="checkbox"/> Nuclear Components:<br>(N Type, Division 1)<br><br><input type="checkbox"/> Nuclear Components:<br>(N Type, Division 5)   | <input type="checkbox"/> Vessels <input type="checkbox"/> Piping Systems <input type="checkbox"/> Storage Tanks <input type="checkbox"/> Pumps <input type="checkbox"/> Line Valves (Cat. C Fittings)<br><input type="checkbox"/> Subcontracting Type only for which overall responsibility is retained and for which all fabrication and installation is subcontracted to other appropriate Certificate of Authorization holders<br><input type="checkbox"/> Field Installation limited to field sites defined in the Quality Assurance Manual |
| <input type="checkbox"/> Nuclear Pressure Relief:<br>(NV Type, Division 1 – Requires design capability; Fitting Category G)<br><br><input type="checkbox"/> Nuclear Pressure Relief:<br>(NV Type, Division 5 – Requires design capability; Fitting Category G) | <input type="checkbox"/> Pressure Relief valves<br><input type="checkbox"/> Rupture Discs   |
| <input type="checkbox"/> Nuclear Parts:<br>(NPT Type, Division 1)<br><br><input type="checkbox"/> Nuclear Parts:<br>(NPT Type, Division 5)   | <input type="checkbox"/> Parts <input type="checkbox"/> Appurtenances (Must include With Design Responsibility)<br><input type="checkbox"/> Piping Subassemblies <input type="checkbox"/> Tubular Products Welded with Filler Metal<br><input type="checkbox"/> With Design Responsibility <input type="checkbox"/> Without Design Responsibility<br><input type="checkbox"/> Field Installation limited to field sites defined in the Quality Assurance Manual   |



|   |   |
|---|---|
| <input type="checkbox"/> Nuclear Supports:<br>(NS Type, Division 1)<br><br><input type="checkbox"/> Nuclear Supports:<br>(NS Type, Division 5)  | <input type="checkbox"/> Standard <input type="checkbox"/> Non-Standard <input type="checkbox"/> Welded <input type="checkbox"/> Non-Welded<br><input type="checkbox"/> With Design Responsibility <input type="checkbox"/> Without Design Responsibility<br><input type="checkbox"/> Field Installation limited to field sites defined in the Quality Assurance Manual   |
| <input type="checkbox"/> Nuclear Assembly:<br>(NA Type, Division 1)<br><br><input type="checkbox"/> Nuclear Assembly:<br>(NA Type, Division 5)  | <input type="checkbox"/> Shop Assembly<br><br><input type="checkbox"/> Field Installation limited to field sites defined in the Quality Assurance Manual  |
| <input type="checkbox"/> Nuclear Fittings:<br>(CSA standard seamless fittings, except for Category C & G, may be treated as material manufacture of Supply. If CSA standard fittings are to be treated as material, complete the <i>Application for Metallic Material Organizations</i> in addition to this application form) | Category: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> H<br><br><input type="checkbox"/> Standard Fitting to a material & dimensional standard <input type="checkbox"/> Seamless<br><input type="checkbox"/> Non-Welded <input type="checkbox"/> Non-Standard <input type="checkbox"/> Welded without filler metal <input type="checkbox"/> Welded with filler metal<br><input type="checkbox"/> With Design Responsibility <input type="checkbox"/> Without Design Responsibility |
| <input type="checkbox"/> Nuclear Repair, Modification, or Replacement   | <input type="checkbox"/> Repair <input type="checkbox"/> Modification <input type="checkbox"/> Replacement <input type="checkbox"/> Welded <input type="checkbox"/> Non-Welded  |
| <input type="checkbox"/> Nuclear Pressure Relief Valve Repair Only  | Special Processes: <input type="checkbox"/> Machining <input type="checkbox"/> Welding <input type="checkbox"/> Heat Treatment<br>Test Media: <input type="checkbox"/> Steam <input type="checkbox"/> Air/Gas <input type="checkbox"/> Liquid   |

**Nuclear Certificate Scope Addition (check all applicable):**

Add Furnishing Metallic Material to this program. Not applicable to N Type subcontracting (complete the *Application for Metallic Material Organizations* in addition to this application form).

**Services to be Provided under the N-Type Certificate of Authorization:**

Machining    Stress Analysis    Design    Forming    Testing    Auditing  
 Inspection    Examination (NDE)    Heat Treatment    Other:

**Subcontracted Activities (Identify the activities that are intended to or may be subcontracted – check all applicable):**

Design    Examination (NDE)    Auditing    Welding    Heat Treatment    Fabrication    Installation  
 Calibration    Material Testing    Testing (Proof, hydro, etc.)    Other:

**Corporate Certificates:**

Corporate Certificate    Yes    Corporate Certificate extension for Certificate number(s):

**Additional Activities/Services Performed at Other Locations (attach additional sheets if required):**

| Location | Activity |
|----------|----------|
|          |          |
|          |          |
|          |          |
|          |          |
|          |          |
|          |          |
|          |          |

Name of Authorized Inspection Agency (AIA) of Record: \_\_\_\_\_

Does the company have a signed Inspection Services Agreement with the above listed AIA?  Yes    No

Company Abbreviation (if used on nameplate or stamping): \_\_\_\_\_

**FEES:**

Ontario applicants, please include a cheque for the Survey fee deposit with this application as shown below. A Pro-Forma Quote will be provided with additional charges that will be invoiced. Applicants outside of Ontario are required to use the correct application and contact TSSA for a quote (additional fees will apply).

| Service  | Fee Type | Fee (see Fee Schedule) | HST         | Total Fees Due |
|--|----------|------------------------|-------------|----------------|
| CSA N285.0 Nuclear Components<br>(All Nuclear Surveys except Metallic Material Organization) | Minimum  | \$ 8,213.00            | \$ 1,067.69 | \$ 9,280.69    |



**CANCELLATION / POSTPONEMENT FEES:**

Cancellation or postponement, by an applicant, of a scheduled Nuclear Survey in Ontario, which occurs 30 working days or less from the agreed site implementation Survey date, will be invoiced as follows. The cancellation fee, also if applicable, any additional charges due to airfare charges, plus applicable taxes will be deducted from the Survey fee deposit. The applicant will be invoiced for the outstanding balance upon completion of the Survey.

- Nuclear Component Survey cancellation or postponement fee **\$1920.00\***

**NOTES:**

- 1) Total survey charges will include the above deposit amount plus hourly billing at the current inspection rate as outlined in the *Boilers and Pressure Vessels Fee Schedule* for the Quality Assessment Specialist, Authorized Nuclear Inspector and Authorized Nuclear Inspector Supervisor's travel, expenses and survey time.
- 2) Team Leader time at location and for review of the manual and travel cost is included in the above deposit amount however, if air travel is required then airfare and expenses are extra and not included in the deposit amount.
- 3) Any extra time for team leader due to additional location and follow-ups will be billed per current inspection rate as outlined in the *Boilers and Pressure Vessels Fee Schedule*.
- 4) Time for pre-survey is not included and will be billed separately per current inspection rate as outlined in the *Boilers and Pressure Vessels Fee Schedule*.
- 5) The following activities related to the Survey such as: quality manual pre-reviews, meetings and/or consultations, pre-survey inspections (and/or site visits), and post-survey follow-ups (site visits and/or document review) will be billed at the current inspection rate as outlined in the *Boilers and Pressure Vessels Fee Schedule*.
- 6) Time in excess of 8 hours per day will be billed at the overtime rate (1.5 times hourly inspection rate in effect at the time of the Survey), per TSSA Survey team member.
- 7) Each Certificate of Authorization will be invoiced at a cost of \$106.50 per certificate, upon completion of a successful Survey.
- 8) \*13% HST is applicable to the Survey fee, hourly inspections billing, and cancellation/postponement fees.
- 9) Applications for each of the following certificate programs requires a separate quality program implementation demonstration, on a demonstration item or production work in progress, to show all aspects of the program applied for, in current operation to a TSSA survey team. Applicants should ensure that the written program is accepted by Authorized Nuclear Inspector Supervisor and fully implemented at each location before requesting TSSA to perform a survey.
  - a) Each location street address for which a nuclear construction or fabrication certificate of authorization is requested (i.e., N, NV, NPT, NA, NS type certificates, including "N Subcontracting" type)
  - b) All supporting location addresses where procurement, QA and/or engineering activities are being controlled, managed, and administered; including those support activities performed at sites other than the main certificate holder location street address.
  - c) Field Site location implementation demonstration at locations remote from any other shop location street address in (a) above when "Field (CNSC Licensed Sites)" or "Additional Location(s) with Code Activity" is requested by the applicant for the Certificate of Authorization.
  - d) For each shop location street address that wishes to include furnishing metallic material including material warehousing, secure storage, and quarantine capabilities; the addition of each of the following activities shall be individually documented in the manual with implementation of the program controls satisfactorily demonstrated by the applicant, before they can be included in a certificate.:
    - "Shipment of material from qualified material organizations to other parties"
    - "Qualification of non-certified material organizations"
    - "Utilization of unqualified source material"
    - "Approval and control of suppliers"
    - "Operations affecting chemical composition, mechanical properties, and/or product form"
  - e) For field sites and/or additional supporting locations not active at the time of a TSSA survey, an additional site visit and implementation demonstration is required. TSSA shall be contacted for a first field audit, immediately upon commencing work at each such location.

By signature below and as a part of the TSSA accreditation, the applicant accepts all conditions related to the issue and use of each Certificate of Authorization provided by TSSA and agrees to TSSA monitoring of the program at TSSA's discretion.

|            |  |        |  |
|------------|--|--------|--|
| Name:      |  | Title: |  |
| Phone:     |  | Email: |  |
| Signature: |  | Date:  |  |



Technical Standards and Safety Authority  
 345 Carlingview Drive  
 Toronto, Ontario M9W 6N9  
 Customer Service: 1.877.682.8772  
 Email: customerservices@tssa.org  
 www.tssa.org

## PAYMENT INSTRUCTIONS

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

If paying by cheque, bank draft, money order or wire transfer, 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](https://forms.tssa.org/Payments/Service-Prepayment-Portal)**

<https://forms.tssa.org/Payments/Service-Prepayment-Portal>

**If paying by Cheque, Bank Draft, Money Order or Wire transfer complete the following and select payment method:**

Name of Applicant/Organization:

Telephone No:

Email Address:

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

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

**Wire Transfer**

**Pay to Bank:** TD Canada Trust

**Beneficiary:** Technical Standards and Safety Authority

**Swift:** TDOMCATTOR

**Account:** 05200306317

Please add \$CDN 15.00 to your remittance for bank handling charges for wire transfers. Send a copy of your wire remittance by e-mail to [areceivable@tssa.org](mailto:areceivable@tssa.org) along with a copy of your application.

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