



## On Site Sewage System Installer Application for Renewal of Registration

For persons engaged in the business of constructing on site, installing, repairing, servicing, cleaning or emptying sewage systems [Section 2.18 of the Ontario Building Code].

<b>1) Applicant Information</b>				
Name of Firm			BCIN	
Full Address		Street Name		Unit Number
Building Number		Lot/con		
City		Province	Postal Code	Country
Telephone ( ) ( )		Fax Number (optional) ( ) ( )		Cell Number (optional) ( ) ( )
E-mail Address (optional)				
<b>2) Correspondence Options</b>				
Official Notices required under the Building Code will be sent by regular mail to the applicant's address.				
The applicant wishes to receive elective correspondence by: <input type="checkbox"/> Letter mail; or <input type="checkbox"/> E-mail (please ensure this field is completed above)				
<b>3) Principal(s) of the Applicant Information – List all principals of the applicant. Attach an additional page if necessary</b>				
Name		Status (i.e., proprietor, director, officer or partner)		Building Code Identification Number, (BCIN) if available
1.				
2.				
Has any information changed since the last Application for Registration? <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes" please complete Schedule A Change of Principal Information				
<b>4) Qualified Supervisor(s) Information – Attach an additional page if necessary</b>				
The following is/are the person(s) who:				
a) have the qualifications set out in clause 2.18.3.2.(1)(a), and				
b) will supervise the construction on site, installation, repair, servicing, cleaning or emptying of sewage systems to be carried out by the applicant or registered person				
Name of qualified supervisor(s)			Building Code Identification Number (BCIN)	
<b>5) Fee – the fee is \$50.00 for renewal of registration</b>				
Payment Option 1 – Credit Card: Visa or Mastercard or AMEX (circle one)			Payment Option 2 – Certified Cheque or Money Order	
Name of Cardholder			<b>Payable to:</b> Minister of Finance  <b>Mail to:</b> Registration Unit Building and Development Branch Ministry of Municipal Affairs and Housing 777 Bay St. 2 <sup>nd</sup> Floor Toronto, ON M5G 2E5 <b>Fax application to:</b> (416) 585-7531	
Card Number		Expiry		
Amount <b>\$50.00</b>	Signature of Cardholder			
<b>6) Acknowledgement – Conditions of Registration</b>				
The Applicant acknowledges that registration is subject to the conditions listed in Sentence 2.18.3.7(1) of the Building Code and agrees to comply with these conditions.				
<b>7) Signature</b>				
a) The information contained in this application is true and correct.				
b) I am the applicant or, where the applicant is a corporation or partnership, I am a person who has authority to bind the applicant.				
Name: _____		Title: _____		
Signature: _____		Date: _____ (dd/mm/yyyy)		

Personal information contained in this form and schedule is collected under the authority of Section 2.18 of the Building Code and will be used for the purpose of administering and enforcing the requirements of the *Building Code Act, 1992* and the Building Code. Questions about the collection of personal information may be addressed to the Manager, Code Interpretation, Registration and Training, Building and Development Branch, Ministry of Municipal Affairs and Housing, 777 Bay St., 2<sup>nd</sup> Flr., Toronto, ON M5G 2E5 (416) 585-6666. This form is subject to change. Refer to [www.obc.mah.gov.on.ca](http://www.obc.mah.gov.on.ca) for latest edition

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## Schedule A Change of Principal Information

(to be attached with the On Site Sewage System Installer Application for Renewal of Registration, if required)

This schedule must be completed if information about the principals of the applicant has changed since the last registration. Use more than one form if necessary. See the instructions for completing the On Site Sewage System Installer Application for Registration Renewal for more information on completing this schedule.

**1) Name of Applicant** (as in section 1 on the On Site Sewage System Installer Application for Renewal of Registration)

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**2) Principal(s) of the Applicant Information** – Complete a section for all principals of the applicant whose information has changed since the last application for registration was made.

Last Name		First Name			Middle Initial
Status: <input type="checkbox"/> Director <input type="checkbox"/> Officer <input type="checkbox"/> Partner		BCIN (if available)			
Residence Address					
Building Number	Street Name			Unit Number	Lot/con
City		Province	Postal Code	Country	
Residential Mailing Address (if different from above)					
Building Number	Street Name			Unit Number	Lot/con
City		Province	Postal Code	Country	

Last Name		First Name			Middle Initial
Status: <input type="checkbox"/> Director <input type="checkbox"/> Officer <input type="checkbox"/> Partner		BCIN (if available)			
Residence Address					
Building Number	Street Name			Unit Number	Lot/con
City		Province	Postal Code	Country	
Residential Mailing Address (if different from above)					
Building Number	Street Name			Unit Number	Lot/con
City		Province	Postal Code	Country	

Last Name		First Name			Middle Initial
Status: <input type="checkbox"/> Director <input type="checkbox"/> Officer <input type="checkbox"/> Partner		BCIN (if available)			
Residence Address					
Building Number	Street Name			Unit Number	Lot/con
City		Province	Postal Code	Country	
Residential Mailing Address (if different from above)					
Building Number	Street Name			Unit Number	Lot/con
City		Province	Postal Code	Country	