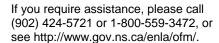


Submit Online at: www.nsbr.ca

Or by Mail to: PO Box 1529 Halifax, NS B3J 2Y4

Business Applicant Profile Information:							
Business Name:							
Operating Name							
Canada Revenue Agency	BN #:						
N.S. Registry of Joint Sto	ck Companies #:						
Business Civic Address (<i>N</i>	Not PO Box):						
Street # Stree	et Name		Unit/Suite/Apt #				
City/Town/County	Province	Country	Postal Code				
Business Mailing Address	s (If Different):						
Street, PO Box, RR #, Site	#, etc.						
City/Town/County	Province	Country	Postal Code				
Business Address in Nova	Scotia:						
Street, P.O. Box, RR #, Site	e #, etc.						
City/Town/County			Postal Code				
Business Contact Informa	ntion:						
Name		Title					
Primary Phone #		Fax #					





PROVINCE OF NOVA SCOTIA

DEPARTMENT OF ENVIRONMENT AND LABOUR **Fuel Safety Section**

Fuel Safety Licence Application Form

(under sections 7 through 9 of the Fuel Safety Regulations)

Please indicate which class of licence you are applying for:

- ☐ Class 1 (Gas Distribution) Licence that authorizes the holder to:
 - distribute propane in bulk or in cylinders not including the retail sale or exchange of cylinders of 20 lbs (9 kg) propane capacity or less
 - operate a propane bulk plant or propane container refill centre; or
 - operate a propane dispensing unit for the purpose of filling portable cash and carry type cylinders and motive fuel or recreational vehicle containers permanently mounted on vehicles

There is a further break down for a Class 1 Licence. Please indicate below which type you are applying for:

		A) bulk plant/dispenser				
		Please provide the aggregate storage capacity Will you be involved in bulk delivery?	Yes _		uswg.	
		Will you be involved in cylinder delivery?				
		If aggregate storage capacity is less than 5000			e the name of your supplie	r.
		B) cylinder handling only Please provide the name of your supplier				
		C) bulk transporter only				
□ Cla	ass 2 (Contractor) Licence that authorizes the holder to:				
:	insta	port, for the purpose of making installations, propall gas equipment and gas piping systems; <i>or</i> r, service and maintain appliances, containers, gas	·	11		
□ Cla	ass 3 (Industrial) Licence that authorizes the holder to:				
	rena	r service and maintain industrial gas-fired equipm	ent on the	nremises of	f the licensee	

- air, service and maintain industrial gas-tired equipment on the premises of the licens
- repair, service and maintain propane motive fuel systems on off-highway vehicles operated by the licensee
- operate a dispensing unit for the purpose of filling cylinders used only by the licensee

□ Class 4 Licence that authorizes the holder to operate a natural gas vehicle refuelling station of any size or a natural gas cylinder filling station.

Insurance

Regulations require that you provide us with verification of public liability insurance in the amount of \$2,000,000 or such other amount, as the Chief Inspector considers appropriate.

Please attach Certificate of Insurance as proof of coverage.

List of Certified Persons: employed by you)		(if below space not sufficient, please attach a list of all certified persons who are			
Name	C	ertificate Number	Class(es) of Certification		
T. D					
Licence Fees					
Note: As of September 2006, Fuel Safet	y Licences	will be issued for a three-ye	ear period.		
Fees:					
 Class 1A - \$0.05/uswg (aggrega capacity) NOTE: \$341.22 minin Class 1B - \$341.22 Class 1C - \$341.22 	_	• Class 3 - \$3	341.22 341.22 341.22		
Payment Type:					
Cheque Money Order	□ V	MasterC MasterC	ard American Express		
Cheque or money order must be made payable to the <i>Minister of Finance</i> .		Credit Card Number	Exp. (mm/yy)		
		Credit Card Number	Ехр. (пші/уу)		
All payments must be in Canadian funds.		Card Holder's Name (as on ca	ard)		
Post-dated cheques will not be accepted.		Card Holder's Signature (as o	n card)		
Amount: \$ (Refunds w	vill be prorat	ed on a yearly basis.)			
Name (Please Print):		Title:			
Signature:					
-			(DD/MM/YYYY)		