Submit Online at: www.nsbr.ca



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

Fax: 902.424.0602

### **Personal Applicant Profile Information**

d Middle Initial	Last Name				
Civic Address: (Not PO Box)					
Street Name		Unit / Suite / Apt #			
Province	Country	Postal Code			
Mailing Address: (If different from above)					
Province	Country	Postal Code			
		) ax #			
	Street Name  Province  ent from above)  Province	Street Name  Province Country  ent from above)  Province Country			

Please Note: The submission of an application with payment does not guarantee application approval.



If you require assistance, please call (902) 424-5400 or (800) 952-2687, or See www.novascotia.ca/lae

**Technical Safety Division** 

### **Fuel Safety Initial Application Form**

### Please indicate if you are applying for a Gas Operator Certificate of Competency

Class B	Operate a bulk propane plant
Class C	Transport propane in portable containers
Class D	Operate a tank truck transporting propane
Class E	Operate a cargo liner transporting propane
Class F	Operate a propane dispensing unit
Class G	Install, repair, service or maintain a gas appliance, container or piping system as permitted by the sub-

#### Class G Subclasses:

- Class G-1Restricted to installing, repairing, servicing and maintaining propane systems for recreational vehicles and mobile homes
- Class G-2 Restricted to installing, repairing, servicing and maintaining propane-fired construction heaters and portable cylinders, excluding supply tanks and building piping
- Class G-3 Restricted to repairing, servicing and maintaining propane-fired domestic barbeque grills
- Class G-4 Restricted to repairing, servicing and maintaining industrial in-house gas-fired appliances and equipment at the location designated on the certificate, and not including installation or any change to the installed system
- Class G-5 Restricted to repairing, servicing and maintaining systems in which liquid propane is used as a motive fuel to power off-highway vehicles, and includes converting the systems
- Class G-6 Restricted to repairing, servicing and maintaining systems in which natural gas I used as a motive fuel to power off-highway vehicles, and includes converting the systems
- Class G-7 Restricted to installing uncharged gas piping systems of any size from the outlet of the meter or second stage regulator to the last shut-off valve, including the burner manifold

**Note:** If applying for a Class F certificate you must provide proof of successful completion of PGAC100-1. If applying for a Class C, Class D or Class E certificate, please provide a copy of your drivers' licence (please be sure to copy both the front and the back of your licence)

### Please indicate which class of Gas Technician Licence you are applying for:

Prior licence # :	
Gas Technician I	Service and installation of gas equipment (vapour phase only) of any btu rating
Gas Technician II	Restricted to the service and installation of gas equipment (vapour phase only) of a btu rating of 400,000 btu or less
Gas Technician III	Restricted to the service and installation of gas equipment (vapour phase only) of a btu rating of 400,000 btu or less and under the supervision of a Gas Technician I or Gas Technician II

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**Technical Safety Division** 

Gas Technician Licence w Gas Technician I (LP)	Service and installation of gas equipment	(vapour or liquid pr	opane) of any btu rating.
Gas Technician II (LP)	Service and installation of gas equipment 400,000 btu or less.	(vapour or liquid pr	opane) of a btu rating of
Oil Burner Technician	Service and installation of oil burning app of oil up to and including grade #2 oil, wa		_
from	as or Oil Technician Licence, you must prov	vide a copy of Certi	fication of Qualification
Apprenticeship Agency.			
0	<b>nformation</b> (Required for Class Certifications related to this application:	on Only)	
Employment Information			
Employment Information Are you self-employed?	Yes No		
Employment Information Are you self-employed?			
Employment Information Are you self-employed? If you are self-employed a your	Yes No		
Employment Information Are you self-employed? If you are self-employed a your  Registration number:	Yes No and registered with the Registry of Joint S	tock Companies, <b>ք</b>	olease provide us with
Employment Information Are you self-employed? If you are self-employed a your Registration number:  f you are self-employed and lumber (i.e. HST number):	Yes No and registered with the Registry of Joint S	tock Companies, p	olease provide us with
Employment Information Are you self-employed? If you are self-employed a your Registration number:  f you are self-employed and lumber (i.e. HST number):	Yes No and registered with the Registry of Joint S registered with the Canada Revenue Agency	tock Companies, p	olease provide us with
Employment Information Are you self-employed? If you are self-employed a your Legistration number: f you are self-employed and lumber (i.e. HST number): Employer's Name (if self-employed)	Yes No  Ind registered with the Registry of Joint S  registered with the Canada Revenue Agency  employed please provide the name you opera	tock Companies, p	olease provide us with with your Business

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**Technical Safety Division** 

PRACTICAL EXPERIENCE	<u>FROM</u>	<u>TO</u>	COMPANY NAME AND ADDRESS
Operating a Bulk Plan			
Cylinder Delivery			-
Tank Truck Operator			
Cargo Liner Operator			
Tractor Trailer Operator			
Dispenser Operator			
Other (Explain)			



If you require assistance, please call (902) 424-5400 or (800) 952-2687, or See <a href="https://www.novascotia.ca/lae">www.novascotia.ca/lae</a>

**Technical Safety Division** 

### This Section to be completed by the Company or Dealer Representative

### TESTIMONIAL FOR CERTIFICATION APPLICATION UNDER FUEL SAFETY SECTION

Assisting in Bulk Plant Operations Holder of a Class B Certificate Assisting in the Delivery of Portable Cylinders Holder of a Class C Certificate Assisting in Tank Truck Operations Holder of a Class D Certificate Assisting in Tank Truck Operations Holder of a Class D Certificate Experience in the Handling of Tractor Trailers Assisting in Cargo Liner Operations Holder of a Class E Certificate Assisting in Dispenser Operations Holder of a Class F Certificate Other (explain)  Name (Please Print) Title:  SIGNATURE OF COMPANY REPRESENTATIVE  Date:  (DD / MM / YYYY)  Previous Exam Information  Have you previously made application for examination to the Fuel Safety Section? Yes No If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write	I hereby	certify that			Has been employed by
(Name of Company or Dealer)  (Name of Company or Dealer)  (Namber of months:  Assisting in Bulk Plant Operations Holder of a Class B Certificate Assisting in the Delivery of Portable Cylinders Holder of a Class C Certificate Assisting in Tank Truck Operations Holder of a Class D Certificate Experience in the Handling of Tractor Trailers Assisting in Cargo Liner Operations Holder of a Class E Certificate Assisting in Dispenser Operations Holder of a Class E Certificate Assisting in Dispenser Operations Holder of a Class F Certificate Other (explain)  Name (Please Print)  Title:  SIGNATURE OF COMPANY REPRESENTATIVE  Date:  (DD / MM / YYYY)  Previous Exam Information  Have you previously made application for examination to the Fuel Safety Section? Yes No If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write			(Name of	Applicant)	
Number of months:  Assisting in Bulk Plant Operations Holder of a Class B Certificate Assisting in the Delivery of Portable Cylinders Holder of a Class C Certificate Assisting in Tank Truck Operations Holder of a Class D Certificate Assisting in Cargo Liner Operations Holder of a Class D Certificate Experience in the Handling of Tractor Trailers Assisting in Cargo Liner Operations Holder of a Class E Certificate Assisting in Dispenser Operations Holder of a Class F Certificate Other (explain)  Name (Please Print) Title:  SIGNATURE OF COMPANY REPRESENTATIVE  Date:  (DD / MM / YYYY)  Previous Exam Information  Have you previously made application for examination to the Fuel Safety Section? Yes No If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write			of		
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Assisting in Bulk Plant Operations Holder of a Class B Certificate Assisting in the Delivery of Portable Cylinders Holder of a Class C Certificate Assisting in Tank Truck Operations Holder of a Class C Dertificate Experience in the Handling of Tractor Trailers Assisting in Cargo Liner Operations Holder of a Class E Certificate Assisting in Dispenser Operations Holder of a Class F Certificate Other (explain)  Name (Please Print) Title:  SIGNATURE OF COMPANY REPRESENTATIVE  Date:  (DD / MM / YYYY)  Previous Exam Information  Have you previously made application for examination to the Fuel Safety Section? Yes No If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write	From _	to		During this time he/she has had	the following experience:
Holder of a Class B Certificate Assisting in the Delivery of Portable Cylinders Holder of a Class C Certificate Assisting in Tank Truck Operations Holder of a Class D Certificate Experience in the Handling of Tractor Trailers Assisting in Cargo Liner Operations Holder of a Class E Certificate Assisting in Dispenser Operations Holder of a Class F Certificate Other (explain)  Name (Please Print)  Title:  Date:  (DD / MM / YYYY)  Previous Exam Information  Have you previously made application for examination to the Fuel Safety Section? Yes No If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write	Number o	of months:			
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Previous Exam Information  Have you previously made application for examination to the Fuel Safety Section? Yes No  If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write	Name (Pa	lease Print)		Title:	
Previous Exam Information  Have you previously made application for examination to the Fuel Safety Section? Yes No  If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write	SIGNAT	URE OF COMPANY REPRESENTAT	TIVE		
Previous Exam Information  Have you previously made application for examination to the Fuel Safety Section? Yes No  If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write	Date:				
Have you previously made application for examination to the Fuel Safety Section? Yes No  If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write		(DD / MM / YYYY)			
Have you previously made application for examination to the Fuel Safety Section? Yes No  If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write					
Have you previously made application for examination to the Fuel Safety Section? Yes No  If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write					
Have you previously made application for examination to the Fuel Safety Section? Yes No  If yes to above, did you write the exam(s) and what were the results? Passed Failed Didn't Write					
If yes to above, did you write the exam(s) and what were the results?  Passed Failed Didn't Write	Previo	ous Exam Information			
If yes to above, did you write the exam(s) and what were the results?  Passed Failed Didn't Write	Have y	ou previously made application for	examination to	the Fuel Safety Section? Yes	No
	If ye	es to above, did you write the exam(s		•	
If previously certified, what is your Certificate number?	If pr	eviously certified, what is your Cert	ificate number	?	

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**Technical Safety Division** 

#### FEES FOR EXAMINATION, GAS OPERATION CERTIFICATE OF COMPETENCY

Fees for Certificate of Competency and 1 year as Operator Licen
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- Class B \$126.00
- Class C \$126.00
- Class D \$126.00

- Class E \$126.00
- Class F \$ 66.40
- Class G \$126.00

#### Fees for 1 year Gas Technician Licence

- Gas Technician I, II, III \$33.20
- Oil Burner Technician \$33.20
- Gas Technician I, II (LP) \$33.20

For your protection, this page containing financial information will be shredded once processed.

Payment Type:						
Cheque	Money Order □	Visa □	MasterCard □	American Express □		
Cheque or money order must be made payable to the <i>Minister of Finance</i> .		Credit Card N	Number	Exp. (MM / YY)		
All payments must be in Canadian funds.		Card Holder'	s Name (as on card)			
Post-dated cheques will not be accepted.		Card Holder'	Card Holder's Signature			
Amount: \$	(Refu	nds will be prorated o	n a yearly basis)			
Name (Please print):			Title:			
Signature:			Date:			
			(DD	O/MM/YYYY)		

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