



Labour, Skills and Immigration

### BPE Permit Application

Made under Section 33 of the  
Boiler and Pressure Equipment Regulations

Boiler and Pressure Equipment Section  
103 Garland Ave, 3<sup>rd</sup> Floor  
Dartmouth NS B3B 0K5  
1-800-9-LABOUR  
1-800-952-2687

**Please note:**

- **A BPE permit is required in accordance with the BPE Regulations, Section 33 prior to undertaking any regulated work.**
- **Per BPE Regulations, Section 35:** The BPE permit holder must display the BPE permit for the regulated work at the site where it is being done.
- **Per BPE Regulations, Section 36:** A BPE permit is valid until the expiry date specified on the BPE permit unless it is suspended or revoked earlier by the BPE Chief Inspector.
- **Per BPE Regulations, Section 37:** A BPE permit holder must notify the BPE Chief Inspector when the regulated work authorized by their BPE permit is complete.
- Pressure equipment located in residential buildings with 12 or less units are exempt from the BPE Regulations.
- **If no notification is given after one year of the permit being issued, it is automatically revoked by the BPE Chief Inspector.**

#### CONTRACTOR DETAILS

Contractor's Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Cell: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Contact Fax #: \_\_\_\_\_

BPE Contractor's Licence #: \_\_\_\_\_ Licence expiry date: \_\_\_\_\_

Purchase Order #: \_\_\_\_\_ LAE Area Inspector: \_\_\_\_\_

#### LOCATION OF REGULATED WORK (Physical address, not PO Box)

Civic #	Street Name	Unit / Suite #	City / Town	County
_____	_____	_____	_____	_____

Building Name: \_\_\_\_\_ Owner's Name: \_\_\_\_\_

Work Start Date: \_\_\_\_\_ Contact the area inspector directly no less than 36 hours prior to your work start date. If start date is unknown, please use the date permit was submitted.

SCOPE OF REGULATED WORK	EQUIPMENT (select at least one)	CAPACITY	BTU
<input type="checkbox"/> Repair	<input type="checkbox"/> Boiler (steam)	_____	_____
<input type="checkbox"/> Maintenance	<input type="checkbox"/> Boiler (water)	_____	_____
<input type="checkbox"/> Alteration	<input type="checkbox"/> Refrigeration		
<input type="checkbox"/> New Construction	<input type="checkbox"/> Unfired Pressure Vessel		
<input type="checkbox"/> Removal of Equipment	<input type="checkbox"/> Other (enter details below)		
<input type="checkbox"/> Pressure Test (you must contact the area inspector prior to the test)			

Brief description of the work to be done:

Email application to: [boilers@novascotia.ca](mailto:boilers@novascotia.ca) **Permit will be returned to you by email**

#### DEPARTMENTAL USE ONLY

Permit # \_\_\_\_\_ Date issued: \_\_\_\_\_