

ED MECHANIC CERTIFICATION RENEWAL FORM

For ED mechanics expiring 2020 or earlier

Payment Card Industry Data Security Standards prevent the use of credit card information sent through email or fax. A Client Service Representative will contact you within three business days to complete any payment process required.

Note: Any personal information collected is handled in accordance with the British Columbia *Freedom and Protection of Privacy Act*. If you have questions about the collection, use, or disclosure of this information, contact the Records, Information and Privacy Analyst for the Technical Safety BC at 1-866-566-7233.

To perform regulated work, Elevating Device Mechanics must be employed by a Licensed elevating devices contractor or must be a licensed contractor.

Instructions: Renewal form must be fully filled in, applications missing information will not be accepted. Documents for continuing education must be included with this renewal, applications missing documentation will not be accepted.

A. Applicant Information

Certification Number: CED					
<input type="checkbox"/> Class A		<input type="checkbox"/> Class C		<input type="checkbox"/> Class H	
<input type="checkbox"/> Class MR					
Last Name: <i>Legal Name</i>			Given Name:		Middle Initial:
Civic Address:	Suite No:	Street No:	Street Name:	City:	Postal Code:
Mailing Address: (If different from above)	Suite No:	Street No:	Street Name:	City:	Postal Code:
Primary Phone:		Mobile Phone:		Email:	
Contact Preference: <input type="checkbox"/> Mail <input type="checkbox"/> Email <input type="checkbox"/> Other: _____					

B. Mechanic Employment and Continuing Education Information

Name of Employer (Licenced ED Contractor):	
Contractor Licence Number:	Employer Phone Number:
<p>NOTE: You must provide proof, acceptable to the provincial safety manager, of having completed at least 24 hours of continuing education within the term of the certificate of qualification you are renewing. Refer to Information Bulletin IB-ED-2017-04 for more information.</p> <p><i>You must attach transcript/supporting documents.</i></p>	
Declaration: I certify that the information I have provided is accurate and true.	
<input type="checkbox"/> Checking this box and submitting this form to BC Safety Authority via email has the same effect as submitting a handwritten signature.	
Applicant Name (please print):	Applicant Signature:
Date: MM / DD / YYYY	

Technical Safety BC is working towards going paperless! Participate by signing up for email correspondence.