



Communities, Land and Environment

Application for Elevator and Lifts Installer's Registration

Freedom of Information and Protection of Privacy

Personal information on this form is collected under section 31(c) of the *Freedom of Information and Protection of Privacy Act* R.S.P.E.I. 1988, c. F-15.01 as it relates directly to and is necessary for the administration of the Elevator, Lifts and Installer's Registration Program. If you have questions about this collection of personal information, you may contact the Chief Inspector - Elevator, Lifts and Amusement Devices; Department of Communities, Land and Environment; 31 Gordon Drive, PO Box 2000; Charlottetown; PE C1A 7N8 Tel: (902) 368-5280.

Applicant Information

Name:		Home Phone:
Address (street/civic):		
City:	Province:	Postal Code:
Work Cell:	Fax:	Email:
Name of Employer (Company):		
Name of Contact Person:		

License Class

- Level I** Required to install, construct, reconstruct, maintain, or alter any elevating device.
- Level II** Required to install, construct, reconstruct, maintain, or alter lifts for person with physical disabilities.

Installer Qualifications

An Installer's Registration Level I or II may be issued to a person who is qualified under Section 9.3 of the PEI *Elevator and Lifts Act* Regulations.

Fees

The fee for an Elevator and Lifts Installer's Registration is \$60.00

An Elevator and Lifts Installer's Registration is valid for a maximum period not exceeding thirty-six (36) months from the date of issuance, as shown on the license.

Please complete this form and return it with the fee of **\$60.00** to the Department of Communities, Land and Environment, Inspection Services Branch, 31 Gordon Drive, P.O. Box 2000, Charlottetown, PE. C1A 7N8.

Cheques should be made payable to the Minister of Finance.

Declaration

I hereby confirm that I meet the qualifications for an Elevator and Lifts Installer's Registration in accordance with the requirements in the PEI *Elevator and Lifts Act* Regulations.

Applicant Signature _____ Date: _____

Administrative Use

Date:		Registration Level:	I <input type="checkbox"/>	II <input type="checkbox"/>
Fee:		Registration Approved:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Receipt No.:		Comments:		
Received by (Initials):		Date of Approval:		
Recommendation by Chief Inspector - Elevator, Lifts and Amusement Devices:				