



APPLICATION FOR SPECIAL APPLIANCE LABEL FOR EQUIPMENT TO BE INSTALLED IN NOVA SCOTIA

CSA INTERNATIONAL

DATE: _____

LABEL No. ASSIGNED: _____

INSPECTOR: _____

DATE ISSUED: _____

Type of Appliance or Equipment: _____

Manufactured by: _____

Model no. _____ Serial no. _____ Type of Fuel: _____

Maximum Input Rating BTUH and/or USGPH: _____

Valve Train Inlet Supply Pressure: _____ Inches W.C. or _____ PSIG

Pressure Downstream of Appliance (Main) Regulator: _____ Inches W.C. or _____ PSIG

Number of Units: _____ Completed and ready for inspection by (date): _____

ENCLOSED ARE THE FOLLOWING DOCUMENTS:

A) Three* copies of gas train schematic drawing No.: _____

B) Three* copies of electrical schematic wiring diagram No.: _____

C) Three* copies of description of components and description of operation No.: _____

** four copies are needed for Newfoundland and Labrador application*

INSPECTION TO TAKE PLACE ON THE PREMISES OF:

Building, Fire and Technical Safety Division

Name: _____

Address: _____

Postal Code: _____

Person to Contact: _____

Telephone: _____ Fax: _____

APPLICATION SUBMITTED BY:

Name: _____

Address: _____

Postal Code: _____

Person to Contact: _____

Telephone: _____ Fax: _____

The Applicant hereby agrees to save the CSA INTERNATIONAL, its members, servants, employees and agents, and any owners, staff, servants and employees of any Laboratory employed by the CSA INTERNATIONAL harmless from any actions, suits, claims for loss, damages or indemnity arising out of damage to the special acceptance of any appliance or equipment, the use of the appliance or equipment, the granting of special acceptance, refusal to grant special acceptance, cancellation of a special acceptance, or damage to the appliance or equipment in the Testing.

The Applicant agrees to indemnify the CSA INTERNATIONAL and save it harmless from all liability or expense incurred by it by reason of the CSA INTERNATIONAL acting under the terms of this Agreement.

Enclosed is a deposit of \$ _____ payable to the Canadian Standards Association. We agree that additional fees could be charged in the eventuality of incomplete documentation, additional site inspection and closure of file.

Name of Applicant _____ Signature of Applicant _____ Company _____ Date _____

THIS FEE IS PAYABLE BY THE SUBMITTER OF THE APPLICATION.

Submit the application form with required supporting documents to:

**Building, Fire and Technical Safety Division
Fuel Safety Section
Box 697
Halifax, N.S. B3J 2T8**