

Application for Approval

Purpose

This application has been developed to help work site parties apply for an approval under the *Occupational Health and Safety (OHS) Act*, Regulations or Code. A Director may request additional information when reviewing the application. Complete all applicable fields. For more information, please see the Applying for an OHS acceptance or approval bulletin.

Application Date	plication Date			Date Received					
Approval Type:									
Castion 1 Information	. on An	nlicat	ian						
Section 1. Information	1 on Ap	piicat	ion						
Applicant Name			Organization						
Mailing Address (inclu	de city	and							
postal code)									
Phone Number			Email address						
Are you applying on behalf of							Another work site party or		
				(never a	group)		parties (ma	y be a group)*	
*If applying on behalf of another party or parties, attach proof of authority to act on behalf of all parties and work site(s) to which the approval will be issued									
Section 2. Information about the work site(s) and work site party or parties to which the approval will be issued *If more than one, attach another sheet									
Is the application for approval			Yes						
as a training agency or for a			No						
training course?			*If yes, go to Section 3 of the application, otherwise continue below						
Legal Name									
Operating Name									
WCB Account Number	•								
WCB Industry Code									
•	corn m	ohilo	equinme	unt2				Yes	
Does the approval concern mobile equipment? *Mobile equipment will be used on more than one work site and does not have a						163			
regular or fixed work site where it is normally used					ave a	No			
Is the application for a group approval?							Yes		
*A group approval is issued to a group of employers or other work site									
parties								No	
Section 3. OHS legisla	tion								
Applicable OHS		IS Act	-	OHS RA	gulation		OHS Code		
legislation	Part	.5 , 100		Section	5		Subsection		
	· arc			50000011			if annlicable)		

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Section 4. Details of approval request						
What is the approval for?						
*Attach any applicable						
supporting documentation						
(e.g. manuals, technical						
specifications, studies,						
correspondence)						
Rationale for request						
Duration of approval requested *Must not be longer than 5 years						
Section 5. Details of consultation (Optional)						
List parties consulted						
Date(s) of consultation						
Describe how the						
consultation was done.						
*Attach any supporting						
documentation (e.g.						
minutes of joint work site						
health and safety						
committee meetings where						
the application was						
discussed)						
Summarize the results of						
consultation, whether any						
concerns were raised, and						
how these concerns						
were/are to be addressed						
Section 6. List supporting do	cumentation attached					
*Supporting documentation may include a hazard assessment, technical report, drawings/photographs, professional engineer's certificate, course content, first aid quality management plan, etc.						
projessional engineer's certificate, course content, first ala quality management plan, etc.						

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Submit the completed application and supporting documentation to:

For all non-mining related requests:

Specialized Professional Services 8th Floor, Labour Building 10808 - 99 Avenue NW Edmonton AB T5K 0G5

or

email: lbr.ohsaccept@gov.ab.ca

For mining related requests:

Director of Inspections for Mining J.G. O'Donoghue Building Main Floor, 7000 – 113 Street Edmonton AB T6H 5T6

or

email: lbr.ohsmining@gov.ab.ca

This document, including all attachments and supporting material, must be posted at the work site and remain posted until the decision on the requested acceptance is received by the applicant as required by s.55(8) Occupational Health and Safety Act. The applicant must also provide a copy to the joint work site health and safety committee or health and safety representative, if one exists. This document, including all attachments and supporting material, is subject to disclosure to all parties involved in the acceptance application consultation under s.55(10) of the Occupational Health and Safety Act. Further, this document, including all attachments and supporting material, may be subject to disclosure under the Freedom of Information Protection of Privacy (FOIP) Act.

Personal information you provide to Occupational Health and Safety (OHS), Alberta Labour is collected under the authorization of Section 33(c) of the Freedom of Information and Protection of Privacy Act and is managed in accordance with Part 2 of the FOIP Act. Personal information will be used by OHS for the purpose of administering the OHS program including processing of applications for acceptance under the Occupational Health and Safety (OHS) Regulations or Code. Personal information will not be used or disclosed for any other purpose than stated, without written consent or unless required or authorized to do so by law. If you have any questions about this program, please contact the OHS program at 1-866-415-8690.

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