



CITY OF SURREY – ELECTRICAL SECTION

Request for Variance

Permit/File No: <small>(not required for lighting retrofit)</small>	
Date: mm/dd/yy :	

This request for variance must only be completed and signed by the person in charge (see *Table of Valid Applicants*) of the regulated work where the variance is being requested. It is an offence to knowingly provide false information on this document.

NOTE: This Request for Variance is being made to the City of Surrey pursuant to Section 32 of the Safety Standards Act. The information on this form is collected to administer the provisions of the Safety Standards Act and will be used to process your request for a variance. If this Request for Variance is refused or if a variance is issued to you with terms and conditions that you do not agree with, you may request in writing, that this decision be reviewed by a Safety Manager in accordance with Section 49 of the Safety Standards Act.

Applicant:

Name:	Title:
Qualification(s) and License No. (e.g., TQ/CQ/P.Eng./AscT/Other -- specify):	
Telephone:	Email address:

Employer Information:

Employer:	Telephone:
Address:	Fax:
City / Prov.:	Email address:

Location of Variance/Permit Information:

This Request for Variance is being made for regulated work performed under the following permit (state type of permit, expiry date, permit #):

Permit No:	Work/Permit Type:	
Installation Address:	City:	Prov.:

- Complete address where the variance is requested to be in place** (if requested for mobile/portable equipment, specify appropriate identification such as serial #, make, etc.):

- Variance Information:**

This request for variance is being made in relation to the following type of regulated product (choose one):

- Electrical Equipment, Electrical Installation, Lighting Retrofit

- 3. **Specific applicable regulation/code (s) that variance is sought from:**

- 4. **Identify the safety objectives, by section as specified above, of the applicable regulations and codes:**

- 5. **Specify the alternative means by which it is proposed to meet the safety objectives:**

- 6. **Provide any evidence that the alternative will meet the objectives identified:**

I certify that I am the person in charge of the work described in this request for variance and am authorized to make this request on behalf of my employer. I agree to indemnify and save harmless the City of Surrey, its elected and appointed officials, officers, employees and agents of the said Authority against all claims, liabilities, judgments, costs and expenses of whatsoever kind which may accrue against the City in connection with any work under the authority of this request for variance.

Applicant Signature: _____ **Date:** _____

This form must be submitted to a Safety Manager or Safety Officer of the City of Surrey.

City of Surrey Safety Officer: _____ **Approved** **Declined** **Rev:**

Date: _____

Reasons for decline:

Table of Valid Applicants - Job Type Valid Applicant

A variance request must be filled out by the person in charge of the work or product to which the variance would apply.
 The following are the valid applicants per job type:

Contractor Installation Permit - Field Safety Representative	Homeowner Installation Permit - Applicant
No-Fee Installation Permit - Field Safety Representative	Operating Permit - Contractor
Product Approval Applicant	Temporary Entertainment Installation Permit Field Safety Representative