



Office of the Fire Commissioner
Inspection and Technical Services Manitoba
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**Assurance of Professional Design and
Commitment for Inspection
*The Gas and Oil Burner Act***

ITSM Form 16

I. Application Information		(PLEASE PRINT)
DATE	INSTALLATION PERMIT NUMBER	
DESCRIPTION OF PROPOSAL (attach additional sheets if necessary)		
II. Declaration Information		
<p>The undersigned hereby gives assurance that, to the best of their knowledge, the design of the above proposal meets the following requirements (excluding the identified clause if a Variance is being considered):</p> <ul style="list-style-type: none"><input type="checkbox"/> <i>The Gas and Oil Burner Act</i><input type="checkbox"/> The Gas and Oil Burner Regulation<input type="checkbox"/> The CSA B149 Series of Codes<input type="checkbox"/> All Fire Code Requirements as defined by the Authority having Jurisdiction<input type="checkbox"/> All Building and Building Permit requirements as defined by the Authority having Jurisdiction <p>Components of the project as shown in the supporting documentation and plans prepared by this registered professional conform to all the applicable Acts, Regulations and By-Laws (excluding the identified clause if a Variance is being considered). Further, the undersigned will be responsible for inspection of the above referenced proposal during fabrication/implementation/installation as required.</p> <p>The undersigned also assured competence in the necessary fields of expertise to undertake the project on the basis of training, ability and expertise in the appropriate professional and technical disciplines.</p> <p>As used herein, inspections shall mean such reviews of the work at the project site and at fabrication locations, where applicable, as the registered professional, on the basis of professional discretion, considers necessary in order to ascertain that the work conforms in all respects to the plans and supporting documents prepared by this registered professional. This includes keeping records of all site visits and any corrective action taken as a result thereof. Copies of the inspection reports will be provided to the Authority having Jurisdiction upon request.</p>		
NAME	SIGNATURE	
DATE (YYYY/MM/DD)	AFFIX PROFESSIONAL SEAL HERE	
ADDRESS		
PHONE NUMBER		
EMAIL		
III. Firm Information		
Complete this section if the Registered Professional is a member of a firm.		
I am member of the firm _____ and I sign this letter on behalf of myself and the firm.		

Note: Registered Professional means registered as a professional engineer in the Province of Manitoba by APEGM, or another Canadian province and equivalent association. Engineers from other countries may be considered at the sole discretion of the authority having jurisdiction.