

Application to Revise Certificate of Authorization

* * * * *

A Certificate of Authorization is required in order to provide services to the public which are part of the practice of cadastral surveying.

S.11 (4) Surveyors Act, RSO 1990, Chap. S.29.

Name and Address of C of A Holder: _____

Proposed New Name (if applicable) _____

Section 22 of Regulation 1026 as revised by O. Reg. 76/04 requires that the name of a corporation holding a Certificate of Authorization shall not be a number name, self-laudatory or otherwise misleading.

NEW HEAD OFFICE address: _____

Phone: _____ Postal Code: _____

FAX: _____ Managing OLS: _____

e-mail: _____ web site: _____

Branch or Consultation Office: _____

(if Consultation office specify hours) _____

Managing OLS: _____

-
- Type of Organization**
- Sole Proprietorship
 - Partnership
 - Corporation
 - Partnership of Corporations

Insurance Coverage:

On approval of the revision, the Association will inform A.J. Gallagher of the required amendment to your professional liability insurance certificate. (If you carry outside coverage it is your responsibility to inform the insurer.)

List the **Official Representative(s)**, being the licensed member(s) who is (are) responsible for personally supervising the firm's practice of cadastral surveying and whose duty it is to ensure that the Surveyors Act and Regulations thereunder and the Bylaws of the Association of Ontario Land Surveyors are complied with by the firm.

Name

Signature

List the names and registration numbers of all partners, members, directors or full-time employees who are licensed members of the Association of Ontario Land Surveyors.

Name

Reg.#

Monument Identification*

*Subject to approval by the Registrar
S.30 (1) Regulation 1026

IF CORPORATION OR PARTNERSHIP OF CORPORATIONS:

Section 14(2)(3) of the Surveyors Act states:

"At least 50 percent of the members of the board of directors
of the corporation shall be members of the Association."

List the name, registration number and address of all partners, officers or directors of the corporation or partnership of corporations.

Name	(Reg.#)	Address	Position
------	---------	---------	----------

Revision Application fee: The fee of \$84.75 (\$75 + HST) MUST BE ENCLOSED.
(This application fee is in addition to the annual cost of a Certificate of Authorization.)

Certification: To be signed by the person(s) who has (have) the authority to bind the firm.

NOTE: If a corporation, your registered *Articles of Incorporation* must be attached with this completed form, along with payment, for your Certificate of Authorization to be processed.

I hereby certify that the statements in this application are true and correct.

Signature

Date

Position Held

Signature

Date

Position Held

Any change in the particulars given in this application must be submitted to the Registrar
within thirty (30) days of the effective date of the change.