ABSA
the pressure equipment safety authority

100, 1111 - 57 Ave NE
Calgary, AB T2E 9B2
Tel : (403) 291-7070 / Fax: (403) 291-4545
AB-134a 2026-11

EFFECTIVE July 17th, 2025

Attention: _____ *(ABSA Inspector)*

Re: Request for Inspection Services Outside Normal Hours

Company Name: _____

Location: _____

Mailing Address: _____

_____

Postal Code: _____

Contact Person: _____

Phone Number: _____ E-mail: _____

We require the services of an ABSA Inspector, outside normal working hours, on the following dates:

Date(s): _____ Starting Time _____ ☐ AM or ☐ PM

_____ Approx. Hours _____

A-Number: _____ Approx. Mileage _____

We understand that Special Inspection fees are applicable for these services and agree to pay these fees at the following rates listed below:

Regular work days	$169.70 per hour with a minimum 4 hours for call out
Weekends and holidays	$254.60 per hour with a minimum charge of 4 hours

_____ _____ _____

Date ***Print Name*** ***Signature***

PLEASE NOTE OUR CANCELLATION POLICY. Once this request has been accepted, your firm will be invoiced for the minimum amount specified above. Any deviations from the specified time may incur additional charges. Times outside the window specified require an additional request form to be authorized.