

**APPLICATION FOR AN OPTIONAL GRADE “B”  
OR TACK WELDER WALL CERTIFICATE**

**ISSUED PURSUANT TO THE PRESSURE WELDERS REGULATION**

I, \_\_\_\_\_  
*Please Print* (Last Name) (First) (Middle Initial) (Birthday yyyy/mm/dd)

of, \_\_\_\_\_  
(Mailing Address) (Postal Code)

File Number **W/TW-** \_\_\_\_\_  
(See Performance Qualification Card)

hereby apply for an optional Grade “B” or Tack Welder wall-size Certificate of Competency.

\_\_\_\_\_ (yyyy/mm/dd) \_\_\_\_\_ (Signature)

**Fee for wall-size certificate is \$59.00.** N.S.F. Cheque subject to a \$25.00 charge.

<p>Cheque payable to:  <b>ABSA, the pressure equipment safety authority</b> 9410 – 20<sup>th</sup> Avenue Edmonton, AB T6N 0A4 Phone (780) 437-9100 Fax (780) 437-7787 Welders Toll free line - 1-877-433-8910 www.absa.ca</p>	<p>Amount: Cash <input type="checkbox"/>, Cheque <input type="checkbox"/>, M/C <input type="checkbox"/>, Visa <input type="checkbox"/> *Debit <input type="checkbox"/>, AMEX <input type="checkbox"/> *Debit only accepted in person. Debit Visa is NOT accepted.</p> <p>Cardholder Name: _____ Card Number: _____ Expiry Date: _____ Signature: _____</p>
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**For ABSA Use Only**

File Number \_\_\_\_\_ Certificate Reference No. \_\_\_\_\_

Date of issue \_\_\_\_\_  
(yyyy/mm/dd) \_\_\_\_\_  
Welding Specialist Signature