ABSA
the pressure equipment safety authority

OUT OF PROVINCE TRANSFER:
Application for Grade B Pressure Welder
Performance Qualification Card

Pursuant to the Canadian Labour Mobility Agreements

Tel: 780-437-9100
Fax: 780-437-7787
welding@absa.ca
AB-129 (Side A) 2026-11

A. Applicant Information

Name of Applicant: _____ Date of Birth: _____
(Last Name) (First Name) (Middle Initial) (yyyy/mm/dd)

Mailing Address: _____
(Apt./Street) (City) (Prov) (Postal Code)

Phone No.: _____ Phone No.: _____ Email Address: _____
(Home) (Work)

B. Declaration

I am the holder of the following certifications, and the tests were administered in the province of:

a) Alberta Grade B Certificate of Competency File Number **W-** _____ ,and

b) Valid Pressure Welders Certificate (No. #) _____ issued by _____ ,
(Province)

with an expiry date of _____
(yyyy/mm/dd)

I do hereby make application to obtain an Alberta Grade "B" Pressure Welders Certificate of Competency under the Safety Codes Act and Regulation and I declare that the information provided is correct.

Note: Supporting documentation must be submitted with the application form.
I confirm that I have attached copies of my:

☐ 1) Grade B Certificate of Competency
☐ 2) Valid Pressure Welders Certificate/documentation that was issued by another Canadian Jurisdiction
☐ 3) Government issued Photo ID (i.e.: valid driver's license)

Signature of Applicant: _____ **Date:** _____ (yyyy/mm/dd)

C. Performance Qualification (To be Completed by ABSA)

☐ BC: BCP100 ☐ Saskatchewan: F3-F4 ☐ Manitoba: F3-F4 ☐ Ontario: F3-F4 issued by TSSA
☐ Quebec: "B" Pressure (Pression B) ☐ New Brunswick: F3-F4 ☐ Nova Scotia: NS01 & NS02
☐ Newfoundland: GSC 001 or GSC 002 ☐ Prince Edward Island: PEI 001

FOR ABSA USE ONLY
File No. W- _____
PQ Card # _____

	Actual Values		Range Qualified	
Process(es)				
GMAW – Transfer mode (QW-409.2)				
Filler metal F-No. (QW-404.15 or QW404.14 for GTAW)				
Weld deposit thickness for each welding process (QW-404.30)				
Process 1: 3 layers minimum: ☐ Yes ☐ No	←complete if deposit thickness ≥ ½"			
Process 2: 3 layers minimum: ☐ Yes ☐ No				
Backing (with/without) (QW-402.4)				
Progression (uphill/downhill) (QW-405.3)				
GTAW or PAW – Filler metal product form (QW-404.23)				
GTAW – Welding current type & polarity (QW-409.4)				
Base metal P-Number to P-Number (QW-403.18)				
Pipe Diameter (minimum O.D.) (QW-403.16)	Plate (Y / N), Pipe ø( )			
Welding position (1G, 5G, Etc.) (QW-405.1)				
GTAW, PAW or GMAW – Backing gas (QW-408.8)				
GTAW or PAW – Consumable insert (QW-404.22)				

☐ I therefore recommend the issuance of a Grade B Certificate of Competency
☐ I therefore do not recommend the issuance of a Grade B Certificate of Competency

Remarks _____

_____

_____ _____ _____
(Issued Date) (Date of Expiry) (Safety Codes Officer)

_____ _____
(SCO E&C) (Date)

The personal information collected on this form is for the purpose of processing your Application for Out of Province, P.Q. Cards. This personal information collection is authorized by section 4(c) of the Protection of Privacy Act and will only be used for this purpose. If you have any questions about the collection of personal information, you may contact ABSA at generalinq@absa.ca or by mail to ABSA, 9410 20 Ave. NW, Edmonton, AB, T6N 0A4.

D. Application Processing Time and Appeals

The application review process will begin once ABSA has received a "complete" application from the applicant. An application is considered complete only when the application, supporting documentation and payment have all been received by ABSA. Application fees are **non-refundable** once the application has been submitted to ABSA; regardless of the outcome of the review.

Incomplete applications submitted without supporting documentation, or missing information required for completing the review of this application, will be closed after 20 business days. Application fees are non-refundable once an application has been closed. Applicants are strongly encouraged to only submit an application if they are able to provide a complete application.

ABSA will provide the applicant with confirmation when the review process has been completed. Please allow 20 business days for the review to be completed.

If you are not satisfied with the outcome of your application regarding certification, please follow the appeal process within 30 calendar days as mentioned on the website: www.absa.ca

E. Fees and Payment

Name of Applicant: _____ _____
(Last Name) (First Name) (Middle Initial) Date of Birth (YYYY/MM/DD)

Non-Refundable Application Fee: $214.20

Cheque payable to: ABSA, the pressure equipment safety authority 9410 – 20th Avenue Edmonton, AB T6N 0A4 **N.S.F. Cheques Subject to $30.25 Fee** **Phone:** (780) 437-9100 **Fax:** (780) 437-7787 www.absa.ca **email to**: welding@absa.ca	Fee: **$214.20** Cash* ☐ Cheque ☐ MC ☐ Visa ☐ Debit* ☐ AMEX ☐ *** Cash and debit payments may only be made in person at an ABSA office (Edmonton or Calgary)** Cardholder Name: _____ Card Number: _____ Expiry Date: _____ (mm/yy) **CVV Number (3 or 4-digit number found on the back of your card)** ☐ Cardholder Signature: _____

Please fax, e-mail or mail application with payment. Please do not submit the application more than once.

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