



Chief Power Engineer – Authorizing Supervision

(ABSA Use Only) Plant Authorization # _____

I, _____ Title _____ A- _____ Certificate Number _____
 (Print) _____ File Number _____
 of _____ Company Name _____ Mailing Address _____ Postal Code _____
 _____ Phone (Work) _____ Fax Number _____ Email Address _____

Boiler(s) A#: _____, A#: _____, A#: _____, A#: _____ **Additional Boiler A#'s to be submitted.**

Declare that, as per section 14(9) of the Power Engineers Regulation that:

(1) I have authorized:

_____ Certificate Holder's Name _____ Certificate Class _____ A- _____ Expiry Date (mm/yy) _____ Signature of Certificate Holder _____
 (Print) _____ File Number _____

to provide supervision for a period **not exceeding 96 hours**, at a level not more than one level

higher than the certificate of competency held, from _____ on _____ to _____ on _____, **and**
 Time (hh) Date (yy/mm/dd) Time (hh) Date (yy/mm/dd)

(2) I deem him or her competent to take charge and operate the

_____ power plant located at _____ as the:
 Kilowatt Rating _____ Location _____

(Please Check Applicable Box)

- Chief Engineer Asst. Shift Engineer Power Engineer In Charge Heating Plant Operator
 Shift Engineer Shift Operator

Reason for the 96 hour Authorization: Emergency Sickness **(Please Check Applicable Box)**

Please provide a detailed explanation:

Signature of Chief Engineer

<p style="text-align: center;">An organizational chart of the company requesting the 96 hour authorization <u>must</u> be attached to this application.</p> <p style="text-align: center;">This chart must clearly show the reporting structure of the company and of the boiler plant personnel.</p>	<p>Please Submit to:</p> <p style="text-align: right;">ABSA, the pressure equipment safety authority 9410 – 20th Avenue Edmonton, AB T6N 0A4 Phone (780) 437-9100 Fax 437-7787 E-Mail: certificates@absa.ca Exams Toll free line - 1-888-454-3926 www.absa.ca</p>
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NOTE: All Authorizing Supervision forms must be submitted to the Administrator within 96 hours of the authorization commencement date

The information you provide is necessary for the administration of the programs as required by the Alberta Safety Codes Act and regulations.
 The personal information collected on this form is for the purpose of reviewing your request to authorize supervision of a Chief Power Engineer. This personal information collection is authorized by section 33(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection of personal information, you may contact generalinq@absa.ca, or by mail to ABSA, 9410 20 Ave. NW, Edmonton, AB, T6N 0A4.