

APPLICATION FOR AUTHORIZATION OF UNDERWATER DIVING

Application No: Account No: Dated:	(40410-110)		Ref: Tel. Email:	Harbour Master's Office (416) 462-3937 : harbourapps@portstoronto.com
THIS APPLICATION Authority.	I is for authorization to dive	e in the waters in t	he juris	diction of the Toronto Port
Applicant's Name:				
Date/s:	Time/s:			
Location:				
Description of Safety	Precautions to be Taken:	:		
The provision of fals	e or misleading informatio	n will result in auth	norizatio	(add separate sheet if necessary) on being withdrawn by TPA.
together with Admin		ayable to the Tor		Harbour Master's office for review, ort Authority) and signed Waiver of
the "TORON Additional Ir Subrogation	NTO PORT AUTHORITY nsured, must be provided clause, a Cross Liability uired as necessary. The cancelled.	AND HIS MAJES prior to the dive clause and a Seve	TY IN in que erability	commercial diving enterprises, with RIGHT OF CANADA" added as an stion. Insurance also to include a of Interest clause. Wreck Removal TPA in the event that the policy is
FFF STRUCTURE.		Authorized Ci		
FEE STRUCTURE: \$20 + HST (individual, per season) \$100 + HST(organization, per season)		(if not a legal e	entity, S	of Group/Organization Signature of individual/s
		assuming pers Print Name ar		
(HST Reg. No. 108122	2458RT)			
		 Tel		
		E-Mail_		