



## BPI Canada Test Centre Application

Please complete all information. There is a **\$600 (+GST/HST)** non-refundable application fee that will cover your first year as a BPI Canada Test Centre if your organization is approved. You will receive notification for annual or auto-renewal via email. The renewal fee is \$600 and is subject to change. Your application will not be considered unless all information is complete, signed, dated, and the application fee has been paid in full. An email address is required in order to receive the most up to date information in a timely and effective manner from BPI Canada.

<b>Business Applying for Test Centre status – Physical Address</b>			
Legal Business Name *		GST # *	
DBA (if applicable – please include documentation with Test Center Application)			
Legal Business Address *			
City *	Province *	Postal Code *	
Phone *	Extension	Fax	Extension
Email *			
Website			
<b>Physical Address of Testing Site (if different from the Legal Business Address provided above)</b>			
Street Address (NO PO BOX)			
City	Prov.	Postal Code	

Please complete the information below for the authorized business contact information. The primary contact will receive all direct mail and email communications from BPI Canada, unless otherwise specified.

<b>BPI Canada Test Centre Primary Contact Information – Mailing Address (check here if same as Physical Address) <input type="checkbox"/></b>			
Authorized Contact Name (this is the person who has authorization to sign the BPI Canada Test Centre Agreement) *			
Title *		Email *	
Phone *	Fax		
Primary Contact Name *			
Title *		Email *	
Mailing Address *			
City *	Prov. *	Postal Code *	
Phone *	Fax		
<b>BPI Canada Test Centre Invoicing Info. – Mailing Address (check here if same as Physical Address) <input type="checkbox"/></b>			
Invoicing Contact Name *			
Title *		Email *	
Mailing Address *			
City *	Prov. *	Postal Code *	
Phone *	Fax		

Your organization will be performing:      Training and Written/Online Exams       Field/Practical Exams

*If you checked off Field/Practical Exams:* Please check off the Certification Exam Designations your Test Centre can offer based on the certifications of your field/practical exam proctors:

Air Leakage Control       Conventional Insulation       Windows & Doors       Siding & Cladding

Blower Door Technician       CAZ Testing

*\*ALC and CI combined = Home Performance Technician. \*\*ALC, CI, Blower Door and CAZ testing = Home Performance Crew Chief*

**Please complete all of the following information:**

Please list the names of all BPI Canada approved proctor(s) you will be using once this agreement is finalized: (You may add proctors at a later date or list those who are in process.)

_____	_____
_____	_____
_____	_____

**Select which BPI Canada Certifications the field proctor(s) currently hold:**

Air Leakage Control  Conventional Insulation  Windows & Doors  Siding & Cladding  Blower Door Technician

CAZ Testing

\*ALC and CI combined = Home Performance Technician. \*\*ALC, CI, Blower Door and CAZ testing = Home Performance Crew Chief

**BPI Test Centre Application Fees can be remitted via one of the following methods:**

<b>Cheque via Canada Post:</b> BPI Canada, 410-250 McDermot Ave Winnipeg, MB R3B 0S5 Attn: Test Centre Application	<b>Credit Card Payment</b> <b>(Visa or Mastercard accepted)</b> via phone: (204) 956-5888 via fax: (204) 956-5819
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I understand the application fee is non-refundable. I have read the Licensing Agreement for BPI Canada Test Centres and agree to all of the terms and conditions set forth in this document. I certify that all information included in this application and accompanying documentation is true and correct and I am authorized to obligate the organization to this agreement.

Signature \_\_\_\_\_ Job Title \_\_\_\_\_ Date \_\_\_\_\_  
*Signing Officer*

Charge my VISA  Charge my MasterCard

Credit Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_