



Registration of constructors and employers engaged in construction

Pursuant to section 5 of the Regulation for Construction Projects made under the Occupational Health and Safety Act, "Before beginning work at a project, each constructor and employer engaged in construction shall complete an approved registration form. The constructor shall ensure that each employer at the project provides to the constructor a completed approved registration form; and a copy of the employer's completed form is kept at the project while the employer is working there."

Nature of business

Individual
 Sole Proprietorship
 Corporation
 Partnership
 Joint Venture

Individual (legal name)

Last name	First name	Middle initial
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Sole proprietor or corporation name

Operating name AMHERST CONCRETE PUMPING LTD.	Business number 100190198
Legal name AMHERST CONCRETE PUMPING LTD.	Corporate number 100190198

Partnership partner or joint venture party 1

Corporation
 Individual

Individual (legal name)

Last name	First name	Middle initial
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Corporate information

Operating name	Business number	
Legal name	Corporate number	
Director name or principal officer name	Title	Date appointed

Partnership partner or joint venture party 2

Corporation
 Individual

Individual (legal name)

Last name	First name	Middle initial
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Corporate information

Operating name	Business number	
Legal name	Corporate number	
Director name or principal officer name	Title	Date appointed

Business address

Unit number	Street number 105	Street name NANTUCKET BLVD.	Street type	Street direction
P.O. Box	Rural route	City/town SCARBOROUGH	Province ON	Postal code M1P 2N5
Telephone number (416) 752-2431	Fax number (416) 751-3293	Email address (if available) info@amherstgroup.ca		

Business registration information

Harmonized sales tax number 100190198	Workplace Safety and Insurance Board (WSIB) account number 1730665	Workplace Safety and Insurance Board (WSIB) rate group number 711 ROADBUILDING AND EXCAVATING
Do you have a clearance certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Certificate number	

Project information

Average number of employees employed by your firm on the project 1-5 6-19 20-49 50+

Project location (OPTIONAL)

Does the project have a street address? Yes No

Location - street address

Unit number	Street number	Street name	Street type	Street direction
City/town	Province ON	Postal Code	Workplace telephone number	

Location - not a street address

Directions to the workplace:

Lot and plan

Acknowledgement

- I confirm I am authorized to complete and submit this form.
I hereby certify that the information provided is true and correct to the best of my knowledge.

Last name of person completing this form BRENNAN	First name of person completing this form VALERIE
Title VICE PRESIDENT	Date (yyyy/mm/dd) 2018/01/04
Email Address info@amherstgroup.ca	