



LETTER OF COMPLIANCE

On behalf of _____ (Organization) we confirm that the following obligations have been met for the 2015 calendar year:

1. We have complied with all of the Administrative policies, procedures and/or systems submitted with our Application which were approved by OSSA.
2. We have maintained all information required by OSSA and participated (if applicable) in Program Reviews and/or Administrative Audits which were conducted at the discretion of the OSSA.
3. We are aware of all the Application Guidelines (APSG2014) and Program Submission Guidelines requirements.
4. We have submitted our training numbers to OSSA within 2 weeks of the end of each quarter.

Furthermore, we intend to maintain or seek licensing on the following programs with the OSSA for the upcoming year.

- Confined Space Entry/Monitor (CSE/M2010)
- Elevated Work Platform (EWP2010)
- Fall Protection (FP2010)
- Fire Watch (FW2010)

Signature (and Print Name)

Date

Title