



NOTIFICATION OF CHANGE IN OPERATIONS

COMPANY DETAILS		
Company name		Contact name
Address		
Telephone number (999-999-9999)	Cell number (999-999-9999)	Email
NOTIFICATION TRIGGER (CHECK ALL THAT APPLY, AND EXPAND WHERE NECESSARY)		
Changes related to dangerous goods		
<input type="checkbox"/> We are proposing to begin transporting dangerous goods.		
<input type="checkbox"/> We are proposing to transport dangerous goods different than those we already transport.		
Changes to railway operations that may affect the safety of the public or personnel or the protection of property or the environment		
<input type="checkbox"/> Introduction, elimination or change of a technology.		
<input type="checkbox"/> Addition, elimination or change of a railway work.		
<input type="checkbox"/> We are proposing an increase in volume of dangerous goods transported.		
<input type="checkbox"/> We are proposing a change to the route on which dangerous goods are transported.		
<input type="checkbox"/> Change affecting personnel including an increase or decrease in the number of employees or a change in their responsibilities or duties.		
<input type="checkbox"/> Other changes		
ABOUT THE PROPOSED CHANGE		
Describe the proposed change in detail		
RISK ASSESSMENT	NOTIFICATION DATE AND SIGNATURE	
Date of risk assessment (yyyy-mm-dd)	Date of notification (yyyy-mm-dd)	Signature

Send completed form to:

Email: railsafety@tc.gc.ca
or

Mail:
Transport Canada
Rail Safety Branch
Mailstop: ASR
427 Laurier Street West,
Ottawa Ontario K1A 0N5

Rail Safety Contact Information:
Phone: 613-998-2985
Email: railsafety@tc.gc.ca