

ENTERPRISE APPLICATION

Please read the Rules Relating to Registration for Certification of Electrical Installations in Scotland and the Certification of Construction (Electrical Installations to BS7671) Scheme guide before completing this form. Available via www.SBSC.uk.net

1 BUSINESS

Trading Title of Business:
(exactly as shown on business stationery)

Total number of employees

Do you carry out electrical installation work? Yes No

Address:

Post Town:

Postcode:

Country:

Telephone No:

Mobile:

Email:

2 PROPOSED OR APPROVED CERTIFIERS EMPLOYED

Number of **Approved Certifiers** employed by the Enterprise*

Name (in BLOCK CAPITALS):

Registration No.

Name (in BLOCK CAPITALS):

Registration No.

Number of **Proposed Certifiers** employed by the Enterprise*

Name (in BLOCK CAPITALS):

Registration No.

Name (in BLOCK CAPITALS):

Registration No.

Notes: The enterprise must employ at least one proposed or Approved Certifier of Construction (Electrical Installations to BS 7671). One Certifier of Construction Application form must be attached for each proposed Certifier.

* If there are more Certifiers employed than there are spaces available above, please provide details of additional Registration/Applicant numbers and names on a separate page and attach to this application.

3 PAST/PRESENT REGISTRATION WITH CERTIFICATION OF CONSTRUCTION (BS7671)

The enterprise has previously been registered: Yes No

The enterprise is currently registered with BSD as an Approved Body for Certification of Construction (Electrical Installations to BS 7671) Yes No If the enterprise has been, or is, registered please complete these details:

Trading Title Registered:

Date Registration Commenced:

Registration No.

Date Registration Cancelled:

4 **EQUIPMENT**

The following items are held, and will be available at the time of assessment:

- Access equipment Plant and tools Transport

5 **TEST INSTRUMENTS HELD BY THE BUSINESS**

The following test instruments are held, and will be available at the time of assessment

- Insulation resistance Continuity Phase earth fault loop impedance
 Fused test leads Residual current device Voltage indication

Other instruments (please describe):

6 **INSURANCE DETAILS**

Public liability

Name of Insurance company:

Amount of cover:

Policy expiry date (month/year):

Employers' liability

Name of Insurance company:

Amount of cover:

Policy expiry date (month/year):

7 **TECHNICAL REFERENCE DOCUMENTS AVAILABLE TO PROPOSED/APPROVED CERTIFIERS**

The latest edition of the following technical reference documents are available to Certifiers:

- BS 7671 Requirements for Electrical Installations
 IET Guidance Note 3 or NICEIC Inspection, Testing and Certification book
 Access to Technical Handbooks Domestic and/or Non-domestic

Other reference documents to be available if certifying other designations within the Scheme

- BS 5839 Part 1 Fire detection and alarm systems for buildings
 BS 5839 Part 6 Fire detection and alarm systems for buildings
 BS 5266 Emergency lighting

Other reference documents (please describe):

8 **EQUIPMENT**

If you are not an NICEIC Approved Contractor or Conforming Body, following receipt of this application you will be contacted by our scheduling team to make an appointment for a full day visit. This date will be booked for as soon as possible from receipt of the application. If you are willing to accept an appointment at short notice, please indicate this below.

I am willing to accept an appointment at short notice.

Yes No

9 **DECLARATION AND PAYMENT**

On behalf of the above business, I hereby apply for registration with the NICEIC for the Certification of Construction (Electrical Installations to BS 7671) Scheme applicable in Scotland. I confirm that the business intends to certify compliance of electrical installation work with building regulations. I have read and agree, on behalf of the business, to comply with the NICEIC Rules Relating to Registration for Certification in Scotland. I understand that the application fee is not refundable.

I wish to pay the application fee by: Cheque Credit card Debit card

I enclose a cheque made payable to NICEIC for £ _____ Cheque No. _____

Or please debit my: Visa MasterCard Maestro/Switch Solo Delta

Card No. _____

Expiry date: _____ Valid from: _____ Issue no: _____ Authorisation code (NICEIC USE ONLY): _____

Name (in BLOCK CAPITALS) _____ Signature: _____ Date: _____

Position in relation to the above business:

- Principal Partner Director NICEIC Principal Duty Holder
 NICEIC Qualified Supervisor Sole Trader
 Other _____

Data Protection Act 1998 This information is collected, processed and stored to adhere with the UK Data Protection Act 1998. Information will be held and used throughout Certsure LLP and may, from time to time, be used to send you marketing information relating to products or services we feel you may be interested in. Please confirm that you would be happy to receive this information: By e-mail By telephone

Please tick here if you would prefer not to receive marketing information from Certsure LLP

Please tick here if you would prefer not to receive marketing information from carefully selected third parties

NICEIC, Warwick House, Houghton Hall Park, Houghton Regis, Dunstable LU5 5ZX
T: 0333 015 6626 W: www.niceic.com