

 **USE BLACK INK** and print with **BLOCK LETTERS**

Application for Designation as a NEW Inspector (Electricity)				
Applicant Details	<table border="1" style="width: 100%;"> <tr> <td style="width: 10%; vertical-align: top;">Mr Mrs Ms</td> <td style="width: 45%;">Given Names:</td> <td style="width: 45%;">Last Name:</td> </tr> </table>	Mr Mrs Ms	Given Names:	Last Name:
	Mr Mrs Ms	Given Names:	Last Name:	
	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Home Phone No: Work Phone No:</td> <td style="width: 50%;">Mobile No: Fax No:</td> </tr> </table>	Home Phone No: Work Phone No:	Mobile No: Fax No:	
	Home Phone No: Work Phone No:	Mobile No: Fax No:		
	Email - Work: Home:			
	<table border="1" style="width: 100%;"> <tr> <td style="width: 70%;">Address:</td> <td style="width: 30%;">Postcode:</td> </tr> </table>	Address:	Postcode:	
	Address:	Postcode:		
	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">EW Licence No:</td> <td style="width: 50%;">Expiry Date:</td> </tr> </table>	EW Licence No:	Expiry Date:	
EW Licence No:	Expiry Date:			
Job Title:				
Base work location:				
<p>I would like to apply for the following category of designation:</p> <p><input type="checkbox"/> Electrical Installation Inspector (Network Operator)</p> <p><input type="checkbox"/> Electrical Licence Inspector (Trade Union)</p> <p><input type="checkbox"/> Electrical Inspector (Building and Energy)</p> <p>I agree to comply with the conditions specified on the issued Certificate of Designation and the Code of Practice for Inspectors (Electricity) in WA.</p> <p>I have never been convicted of a breach of any part of the <i>Electricity Act 1945</i> and Regulations.</p> <p>I have never been convicted of any offence involving theft, fraud, dishonesty, drug trafficking, sexual act or violence.</p> <p><input type="checkbox"/> National Police Clearance certificate is enclosed (Valid within 3 months of application).</p> <p>Applicant Signature: Date:</p>				

Supporting Evidence	Attached to this application are copies of: <input type="checkbox"/> Unrestricted Electrician's Licence <input type="checkbox"/> Formal qualifications <input type="checkbox"/> Current personal resume	<input type="checkbox"/> Confirmation that applicant is a full time employee of a trade union (for Electrical Licence Inspectors only)
Employer Details	Company / Business Name:	ACN:
	Address:	Postcode:
	<p>I endorse this application on behalf of the employer.</p> <p>I certify that the applicant:</p> <ul style="list-style-type: none"> • has been assessed as competent in the carrying out of electrical inspections; • has adequate skills and knowledge to carry out electrical installation inspections to an acceptable standard; and • fully understands this network operator's Inspection System Plan and Policy Statement, and related policies and procedures. <p>I certify that the applicant's employer has at least \$5M general liability insurance.</p> <p>Signature: Date:</p> <p>Name: Position:</p> <p>Phone: Email:</p>	

Send to: **Director of Energy Safety or Building and Energy**
Locked Bag 100
East Perth WA 6892

Complete/sign and email to - Director of Energy Safety
EGPGeneralAdmin@demirs.wa.gov.au

FOR BUILDING AND ENERGY USE ONLY		
Information Checklist	<input type="checkbox"/> Electrical Licence <input type="checkbox"/> Formal qualifications <input type="checkbox"/> National police clearance <input type="checkbox"/> Employer supporting documentation	Comments:
	<p>All required information provided</p> <p>Signature Date:</p>	