

SAFE ENERGY IRELAND APPLICATION FORM

Safe Electric
Safe Energy

Hazel House Millennium Business Park Monread
South Naas Co. Kildare W91 PXP3

THIS INFORMATION IS CONFIDENTIAL TO SAFE ENERGY IRELAND

(*) Mandatory fields

Please use BLOK CAPITALS throughout

1 APPLICANT

1.1 *Company

1.1 *Name

2 *Business address

EIR Code *Tel *Mobile

Website

*Email

(Communications will be forward to this address)

3.1 *Have you been previously Registered Yes No (if Yes, Note File No)

3.2 *Have you applied before Yes No (if yes, NOTE Application No)

4.1 *VAT No

4.2 *PPS No

Please use BLOK CAPITALS throughout

5 FURTHER DETAILS OF

5.1 *Is it a Limited Liability Company Yes No

5.2 *Is it a Partnership Yes No

5.3 *Names of Partners/Directors (if applicable)

6 BUSINESS DETAILS

6.1 *Nature of Business
Electrical Contracting Yes No If No, what % of your work is electrical%
Other (specify)

6.2 *Date of start of the business in Electrical Contracting

6.3 *Give name of Public Liability Insurers (and Employers Liability if you are an employer). Please provide a copy of Insurance Certificate with the Application Form

6.4 *Total number of electricians employed including apprentices.....

7 SAFETY REQUIREMENTS

7.1 *Do you possess a copy of and have full knowledge of the National Rules for Electrical Installations current edition Yes No

7.2 *Do you possess and use test equipment required to comply with the current CRU Criteria Document Section C

Insulation Tester Yes No Earth Loop Impedance Tester Yes No

Continuity Tester Yes No RCD Tester Yes No

8 UNDERTAKINGS

8.1 Do you undertake to ensure that the standard of you electrical installation work always conforms with the current National Rules for Electrical Installations Yes No

8.2 Do you and your Qualified Certifier (if applicable) agree to observe and follow the Rules of Registration of Safe Electric Yes No

8.3 Do you and your Qualified Certifier clearly understand the circumstances under which registration with Safe Electric may be cancelled Yes No

If yes, please give details and dates.....

- 8.4 Have you or your Qualified Certifier previously applied to or been accepted by SAFE ELECTRIC**
If yes, please give details and dates
- 8.6 Has any other regulatory body taken disciplinary action against you** Yes No
If yes, please give details and dates
- 8.7 As part of its evaluation process, Safe Electric may consult with another body concerning the applicant** Yes No
- 8.7 You agree to be bound to the current version of the CRU Criteria Document** Yes No
- 8.7 You agree that disclosure of your data to third parties is not permitted, save where the data may be lawfully disclosed to the CRU and related third parties in connection with Safe Electric's obligations as an Electrical Safety Supervisory Body or where required by law (e.g. for the prevention/investigation of crime / injuries to persons)** Yes No

9 *UNDERTAKINGS

- 9.1** Full Name (Block Capitals) Signature
Mobile Number Email
Technical Courses attended with dates (please include documentary evidence of your electrical qualifications and your Verification and Certification course results with your application)
.....
.....
- 9.2** Employment History of Qualified Certifier (Please begin with appendices details up to present day)
Name of Employer
Address Telephone.....
Dates: From To
Further Employment
Date Company Position
.....
.....
.....
Details of other relevant employments
- 9.3** Are you an acting Qualified Certifier for any other Registered Electrical Contractor)

9 *PRINCIPAL DUTY HOLDER

Full Name
Position in company
(Note: The Principal Duty Holder has responsibility for all matters relating to registration and is the primary point of contract with Safe Electric)

I/We, hereby declare that all the information given in this Application Form is correct to the best of my/our knowledge and belief [wilfully misleading information will be grounds for expulsion]. I/We hereby undertake if so, registered to regularly observe the Rules of Safe Electric (available on the Safe Electric Website – 'Join Safe Electric' section).

I/we hereby agree to receive and address any queries related to my application/membership such as regular communication, reminders, and notifications from Safe Electric by email. * Yes

Signed by Principal Duty Holder.....
For and on behalf of Company..... Date.....