

# Membership Application form

## Jersey - Electrical Only



**IMPORTANT: IF THE SCOPE YOU SEEK INCLUDES OTHER TRADES (HEATING, VENTILATION & AIR CONDITIONING, PLUMBING OR BUILDING FABRIC) PLEASE USE THE "APPLICATION FORM FOR CERTIFICATION AND/OR MEMBERSHIP".** This application form is for companies wishing to receive certification of competence and approval under the following schemes: NAPIT Membership (in all cases), Competent Person Scheme (CPS), Electrotechnical Assessment Specification Certification (EAS) Electrical Third Party Certification (ETPC), Jersey Bye-law Scheme (JB) and TrustMark (TM). There is a separate form for Associate Membership, Corporate Membership, Electrical Duty Holder Membership and Student Membership. (please use the appropriate form for each of these).

**Please Note:** Your assessment cannot be arranged until the requested documents and application form have been received.

Please fill out this application form in CAPITAL LETTERS using black ink and return with all required supporting documents then email to [applications@napit.org.uk](mailto:applications@napit.org.uk) or post to NAPIT Administration Centre, 4th Floor Mill 3, Pleasley Vale Business Park, Mansfield, Nottinghamshire NG19 8RL

If you have any problems filling in this form please contact our Registrations Advisors who will be happy to assist, on 0345 543 0330

1. Company Details			
Sole Trader	<input type="checkbox"/>	Partnership	<input type="checkbox"/>
Limited Company	<input type="checkbox"/>	Company Registration No.	<input type="text"/>
Other	<input type="text"/>		
Company registered name	<input type="text"/>		
Company trading name	<input type="text"/>		
Building number or name	<input type="text"/>		
Street	<input type="text"/>		
District	<input type="text"/>		
Town	<input type="text"/>		
County	<input type="text"/>	Postcode	<input type="text"/>
Business telephone number	<input type="text"/>	Fax number (if available)	<input type="text"/>
Enquiry email address	<input type="text"/>		
Website address	<input type="text"/>		
Please indicate here how many operatives you wish to register as competent. If more than one, copy the back sheet of this form as needed.			

Details given must be that which you wish to be made public onto the relevant registers as detailed in section 8.

2. Nominated Representative Details			
(if you need to have separate contacts for different purposes please let us know on a separate sheet)			
Title (Mr/Mrs/Miss/Ms/Other)	<input type="text"/>	Position	<input type="text"/>
Surname	<input type="text"/>		
Forename(s)	<input type="text"/>		
Telephone number (if different)	<input type="text"/>	Mobile phone number	<input type="text"/>
Email address	<input type="text"/>		

### 3. Scope of Application

Please indicate below the nature of electrical work that you undertake.

Areas of Work	Tick
Electrical installation work under the Jersey Bye-law Scheme	
<b>Electrical installation work outside Jersey</b>	
Domestic electrical installation work under Part P of the Building Regulations (England & Wales only)	
<i>If this is defined scope electrical work for another trade indicate which trade here:</i>	
Domestic electrical installation work to BS 7671 outside Jersey and not covered by Part P (EAS certificated)	
Non-domestic electrical installation work to BS 7671 outside Jersey (EAS certificated)	
Electrical Inspector Scheme - Electrical Installation Condition Reporting (EICR work)	
<i>Please indicate which areas of EICR work you carry out:</i> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/>	
Portable Appliance Testing (PAT)	

### 4. Fee Prices quoted are exempt from tax

Non-Refundable Application Fee		
Membership Fee		

Please tick to indicate additional memberships required Tick

TrustMark membership listed as an "Electrician" on the TrustMark website		
Additional operatives fee (£60.00 per operative)	Number of Operatives	
If an extra operative has NOT completed a Certificate of Competence within the last 5 years, then an extra operative fee of £300.00 per operative will be required.	Number of Operatives	

**Total**

### 5. Insurance

Public Liability Insurance			
Insurance company		Policy number	
Cover (£)		Policy expiry date	
Professional Indemnity Insurance			
Insurance company		Policy number	
Cover (£)		Policy expiry date	
If you do not have insurance in place or would like to speak with our specialist NAPIT Insurance Team please tick here to request a quote and call back <input type="checkbox"/>			

### 6. Previous/other certification or legacy issues

If you have been a member of NAPIT before please provide your membership number:		
If you are transferring from another certification/registration body please state their name:		
In relation to the scope of membership applied for please answer the following questions:	YES	NO
Are you currently a member of another certification/registration body for these activities?		
Have you ever had certification/registration withdrawn or suspended?		
Have you ever made an unsuccessful application for membership?		
Do you have any open non-conformities, improvement actions or open complaints?		
Is there any open or pending legal action against the company relating to the activities applied for?		
If the answer to any of the above items is "YES" please provide details below or attach further information:		

**7. Geographical Coverage** (please indicate the regions where you are active)

Jersey		England		Wales		Scotland		Other (e.g. IoM, N. Ireland etc)	
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**8. Public Registers**

Your company name, scheme membership number, and the status of your membership will be automatically made public. Successful applicants will be listed on [www.napit.org.uk](http://www.napit.org.uk) and details will be shared with relevant scheme administrators and other parties as described in the relevant **NAPIT Scheme Rules**.\*

**9. Declaration by an Authorised Representative of the Company** (this should be a Director, Partner or Owner of the Company)

I confirm that the information provided in this application is correct and where applicable, I consent to share the details of any individuals named on this form or any supplementary form for the purposes of processing and maintaining any membership that may arise from this application. Any changes will be notified to NAPIT in writing.

By signing this agreement, you authorise NAPIT to carry out credit checks on you and your business throughout the term of your membership, as required by the NAPIT Scheme rules.\*

I have read, understood and agree on behalf of the company named in this application to abide by the relevant NAPIT Scheme Rules\* and all documents referred to therein. I understand that I may be asked to provide further information in order to progress with this application.

Name		Position	
Signature		Date	

**10. Promotional Code**

A promotional code may be applied to this application only if provided by NAPIT or its supporting partners under applicable circumstances e.g. exhibitions/trade events, campaigns, promotional offers etc. Terms and conditions\* may apply.

**Important Notes**

1. Pricing is based on an assumption that competence can be assessed in a single visit. Where this is not possible additional fees could arise, but this should be identified before the assessment goes ahead.
2. The prices on this form only relate to the application, and initial assessment, for certification/registration. Other fees will apply for other activities (for example reassessment, renewal, work notification, cancelled assessments) which can be found on the NAPIT website.

\* 3. For NAPIT scheme rules and for Terms and Conditions please visit [www.napit.org.uk](http://www.napit.org.uk)

# Operative Details

(refer to the document "NAPIT Registration Guide to Qualifications Requirements – Electrical")

If you have several operatives please photocopy this form. If you have over 10 please contact NAPIT on 0345 543 0330

A. Personal details (these will be held in accordance with the Data Protection Act)			
Title (Mr/Mrs/Miss/Ms/Other)		National Insurance No.	
Surname		Date of birth	
Forename(s)			

B. Scope of electrical competence claimed (please select all that apply)			
Full Scope for All Electrical Work	<input type="checkbox"/>	Full Scope for Dwellings Only	<input type="checkbox"/>
		Defined Scope in dwellings only	<input type="checkbox"/>
EICR Work	<input type="checkbox"/>	Portable Appliance Testing	<input type="checkbox"/>
		Fixed Appliance Testing	<input type="checkbox"/>

C. Applying as an existing or previous (last 2 years) registered competent person			
If applying as an existing/previous registered competent person you do not need to complete sections D, E, F or G			
Name of Registration Body		Date of last assessment	
Wiring Regulations Qualification (Code from Qualification Guide List 7)		Date qualification gained	

D. Applying with qualifications or equivalent evidence of competence (please refer to the Qualifications Guide and select ONE of the following to best describe your circumstances)			
1. Current level 3 NVQ Diploma	<input type="checkbox"/>	2. Current level 3 Certificate	<input type="checkbox"/>
		3. Previous level 3 NVQ	<input type="checkbox"/>
4. Older qualification*	<input type="checkbox"/>	5. Related qualification	<input type="checkbox"/>
		6. Certificate of competence †	<input type="checkbox"/>

\*will require evidence of continuing professional development (see Qualifications Guide)

† Certificates of competence are required for the Jersey Byelaw Scheme.

E. Details of qualifications held (please refer to the Qualifications Guide and identify those which satisfy each of the following requirements, if you hold a qualification not listed in the Guide that you think is satisfactory please contact NAPIT for it to be considered)			
Area of competence	Guide List	NAPIT Code	Date Gained
Main (core) electrical installation competence	1 – 3		
Wiring regulations knowledge competence (This is an additional qualification required for registration unless you have completed a current level 3 certificate or diploma from lists 1 to 2)	4		
Initial inspection and testing qualification (This is an additional qualification required for registration unless you have completed a current level 3 certificate or diploma from lists 1 to 2)	5		
Periodic inspection and testing qualification (This is an additional qualification required for all electrical work unless you hold a level 3 certificate or diploma from lists 1 to 2 which included periodic inspection and testing.)	6		
Portable appliance testing (if registration sought for this)	7		

F. Indicate how many years' experience you have in each area of electrical work			
Installation work on dwellings	<input type="checkbox"/>	Inspection and testing work	<input type="checkbox"/>
Installation work on other buildings	<input type="checkbox"/>	Portable appliance testing work	<input type="checkbox"/>
Other related electrical work (if so state the nature of the work)			

G. Details of electrical competence history (applicants should demonstrate at least 2 years relevant experience unless applying for dwellings only with a core in lists 1, 2, 3 or 4)			
Date From	Date To	Employer / sole trading or training organisation	Role held

Please enclose/email:

- Copies of all qualifications/certificates indicated above (or evidence of previous registration for section C).
- Email us a clear head and shoulders image from any device or send us two copies of a head and shoulders photograph with the name of the individual clearly written on the back.