

**Form of application for grant of Certificate of Competency to a person under sub-rule (I) of 2A.**

1. Name
2. Date of Birth
3. Name of the Organisation (if not self-employed)
4. Designation
5. Educational qualification (copies of testimonials to be attached)
6. Details of professional experience (in chronological order)

Name of the Organization	Period of Service Designation	Area of Responsibility
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7. Membership, if any, of professional bodies
8. (i) Details of facilities (examination, testing, etc.) at his disposal.  
(ii) Arrangements for calibrating and maintaining the accuracy of these facilities.
9. Purpose for which Competency Certificate is sought (section or sections of the Act should be stated).
10. Whether the applicant has been declared as a competent person under any statute (if so, the details)
11. Any other relevant information.
12. Declaration by the applicant.

I, ....., hereby declare that the information furnished above is true.

I undertake

- (a) that in the event of any change in the facilities at my disposal (either addition or deletion) or my leaving the aforesaid organisation, I will promptly inform the Chief Inspector;
- (b) to maintain the facilities in good working order, calibrated periodically as per manufacturers instructions or as per National Standards; and
- (c) to fulfill and abide by all the conditions stipulated in the certificate of competency and instructions issued by the Chief Inspector from time to time.

Place &

Date

Signature of the applicant :

**Declaration by the Institution (if employed)**

I, ....., certify that Shri ..... whose details are furnished above, is in our employment and nominate him on behalf of the organisation for the purposes of being declared as a competent person under the Act. I also undertake that I will.

- (a) notify the Chief Inspector in case the competent person leaves our employment;
- (b) provide and maintain in good order all facilities at his disposal as mentioned above;
- (c) notify the Chief Inspector any change in the facilities (either addition or deletion)

Signature

Designation

Telephone No.

Official Seal

Date:

**Form of Application for grant of Certificate of Competency to an Institution under sub-rule (2) of Rule 2A.**

1. Name and full address of the Organisation
2. Organisation's status (specify whether Government, Autonomous, Co-operative, Corporate or Private)
3. Purpose for which Competency Certificate is sought (specify Section(s) of the Act)
4. Whether the Organisation has been declared as a competent person under this or any other statute. If so, give details.
5. Particulars of persons employed and possessing qualification and experience as set out in Schedule annexed to sub-rule (1) of Rule 2A.

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S.No.	Name and Designation	Qualifications	Experience	Section(s) and the Rules under which Competency is sought for.
1.				
2.				

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6. Details of facilities (relevant to item 3 above) and arrangements made for their maintenance and arrangements made for their maintenance and periodic calibration.

7. Any other relevant information.

8. Declaration:

I, ..... hereby, on behalf of ..... Certify the details furnished above are correct to the best of my knowledge. I undertake to ----

(ii) maintain the facilities in good working order, calibrated periodically as per manufacturers instructions or as per National Standards; and

(ii) to fulfil and abide by all the conditions stipulated in the certificate of competency and instructions issued by the Chief Inspector from time to time.

Signature of Head of the  
Institution or of the persons  
authorised to sign on his behalf.  
Designation  
Place & Date