

All COCs are issued in with accordance with the New Zealand Gas Industry Certificate of Competency Criteria and Framework for Reticulated Gas (Natural Gas and/or LPG) Distribution & Gas Measurement System (GMS), issued by GANZ, updated April 2011.

Employer's Details	
Name of Employer	
Contact Person	
Employer Courier Address (Please do not specify a PO Box unless	you can receive packages in it)
Work Phone	Work Fax

Applicant's Details

First Name	Middle Name		Last Nan	ne
Your Home Address				Date of Birth//
Home Phone	Mobile		Email A	Address
NZQA Number		Gasfitter Registration Number (if applicable) Please attach a copy of your current Gasfitter Registration card		
Sign here		Date	'/	

Application Type

Application Type: 🛛 New			New		
(please tick)		is required to attend a refresher training course every two years)			
		Replacement (The issue date and expiry date will match the certificate being replaced)			
Work Type applied for (please tick):					
	Authorised Restr	ict	ed Access*		Leakage Response
	Network Induction	on			CP Survey
	Networks Genera	al			Odorant Survey
	Construction Pipe	ela	ying		Mark out, stand-overs and location survey
	Construction Ser	vic	e Laying		Network Operations
	Construction of N	Mai	ins and Services		Field Supervision and/or Auditing
	Networks Standa	ard	Pressure Control		GMS Disconnection/Reconnection GIP001
	Networks Advan	cec	Pressure Control		GMS Leakage Response
	Leakage Survey				

*Note: When applying for "Authorised Restricted Access" applicants must have the Principals section on page 2 signed before CoC card can be issued.

Certificate of Competence (CoC) Eligibility

Please refer to the "New Zealand Gas Industry Certificate of Competency Criteria and Framework for Reticulated Gas (Natural Gas and/or LPG) Distribution & Gas Measurement System (GMS)" for information on the CoC Work Types, and the Qualifications & Network Specific Requirements.

Identification Photograph

Please provide a <u>recent</u> identification photograph of yourself with this application (passport style, front on, head and shoulders with no hat or dark glasses).

Photographs can be electronically provided by email to <u>certificates@mito.org.nz</u> or on disc, or in hardcopy such as passport style. Photographs taken with PXT capable mobile phones are acceptable, dependant on picture quality. MITO may request a replacement photograph if deemed unsuitable.

Electronic photo technical requirements:

File type: Jpg or Jpeg File size: Greater than 500kb and less than 10MB Dimensions: Minimum 900 pixels wide x 1200 pixels high -- maximum 4500 pixels wide x 6000 pixels high Aspect Ratio: 4:3 (Width:Height ratio)

Referee – Verification of CoC Eligibility

The following must be completed by a person who can verify/confirm that the information you have given on page 1 is correct, e.g. your manager or supervisor

Name of Applicant:			
Name of Referee:			
Position:			
Company:			
Referee Contact Details:	Work Telephone	Mobile	
I attest that the information on authorised by the company to	page 1 is correct, and the photograph pl make such a statement.	rovided of the applicant is	genuine. I am
Referees Signature		Date	
Principals – Verification of	Eligibility for Authorised Restricted	d Access CoC only	
The following must be comple Representative	ted by either the Principal Contractor [if S	Sub-contractor] or the Ass	et Owners
Name of Principal Contractor/	Asset Owner:		
Position:			
Company:			
Contact Details:	Work Telephone	Mobile	
l attest that the applicant on p make such a statement.	age 1 is eligible to apply for this category	. I am authorised by the o	company to
Signature			

Access of Information

In signing this application form, the details relating to your individual Certificates of Competence (CoCs) will be made available to your Industry Association, training provider(s) for the purpose of arranging training and other organisations that may require information on the status of your CoC, including your company's Network owner.

CoC Application Fees

CoC Card	Issue or Replacement	
All CoC Categories	\$30.60	

All fees are GST inclusive.

Card type: UVisa

Please indicate ☑ how you will make payment for this CoC:

- □ Cheque enclosed. Please make cheques out to MITO.
- Please invoice company using Purchase Order Number (*required*): _

Only customers who have approved credit can be invoiced, and payment must be received by MITO by the 20th of the month following the date on the invoice.

Customers who do not have approved credit must pre-pay for all applications before we can process. Contact <u>finance@mito.org.nz</u> if you wish to apply for approved credit.

MITO may initiate debt recovery action for any non-payment of amounts owing to MITO and the applicant will be liable for any such collection costs incurred by MITO or our nominated agent.

Payment by internet banking to account number 060513 0122089 00

□ MasterCard

Depayment by credit card. Please complete details below:

Name:	
Contact Phone:	Credit Card Expiry: /
Credit Card Number:	
Signature:	Amount: \$

Checklist

Please tick that you have the completed the following:

Training I have completed the required Unit Standards (If you are not sure check with MITO or your manager)	
If renewal application, I have completed refresher training	
Personal Details I have completed all the details on page 1	
I have enclosed a copy of my current Gasfitter Registration Card (If applicable)	
Referee Details My 'Verification of CoC Eligibility' on page 2 has been confirmed and signed by a Referee	
My 'Principals Verification of CoC Eligibility' on page 2 has been confirmed and signed by the Asset Owner (Authorised Restricted Access CoC only)	
Photograph Provided I have provided a photograph of myself (electronic or hard copy)	
Fees I have indicated how payment will be made on Page 3	

Please return the completed form and attachments to:

certificates@mito.org.nz OR

MITO PO Box 10803 The Terrace Wellington 6143

If you have any queries please contact:

MITO Freephone 0800 88 21 21 Email <u>certificates@mito.org.nz</u> www.mito.org.nz