



APPLICATION FORM FOR ELECTRICAL CONTRACTORS' CERTIFICATE

PART A

Application No: _____

Date Received: _____

Please fill entire form and add receipt of Application Fee

1. ELECTRICAL CONTRACTOR

Indicate Class 1 – 5 _____

2. Full Name of Presenter: _____

3. ID / Social Security No.: (Attach copy) _____

4. Business Name: _____

5. Type of Ownership (Attach copies of business documents)

- Sole Proprietorship Partnership Limited Partnership
 Limited Liability Company

5. Mailing Address: (please use P.O. Box): _____

6. Physical Address: (location address): _____

7. Phone No.: _____

8. Fax No.: _____

9. Email Address: _____

10. Contact Person if different from presenter:

Name: _____

Phone No.: _____ Email: _____

11. Details of Each Director of Company:

Name/Address/Telephone number

- a) _____
b) _____
c) _____

12. Liability Insurance:

Evidence of adequate insurance cover (A certificate of insurance MUST be attached to the application):

13. Workmen's compensation insurance:

- Available Not Available

If available state limit: _____

14. Electrical Professional employed by the Contractor:

I agree to assign my certificate to the contractor and affirm that I shall comply with all the applicable provisions of the ESI laws, regulations, rules, the Certification of Contractors and Electricity Professionals Rules, Electricity Codes, and any other Standards in force in Sierra Leone, at any given time.

I understand that providing false information on this application or in any report to the Commission may result in civil or criminal penalties or a revocation of my certificate.

(A contractor MUST be or employ at least or be a certified Technician to qualify)

Name: _____

Certificate of Competence No.: _____

Signature: _____

Date signed: _____

15. Key staff (if corporate applicant):

Electrical professionals:

Managerial staff:

Other professionals:

(Attach list and profiles of key staff)

16. STATEMENT OF OWNER/CHIEF EXECUTIVE

I certify that I shall maintain the required insurance and that I shall comply with all the applicable provisions of the ESI laws, regulations, rules, the Certification of Contractors and Electricity Professionals Rules, Electricity Codes, and any other Standards in force in Sierra Leone, at any given time.

I understand that providing false information on this application or in any report to the Commission may result in civil or criminal penalties or a revocation of the certificate. I am requesting.

Name: _____

Signature: _____

Date Signed: _____

PART B

Additional Information requirement for corporate bodies

- (1) A corporate applicant shall provide the following additional information in respect of the application for a certificate, as shall be relevant:
 - a. A business registration certificate;
 - b. Particulars of facilities and equipment;
 - c. Annual reports for preceding two years including a financial statement and a summary of electrical industry activities undertaken during the period;
 - d. List of sub-contractors, if any;
 - e. Evidence of insurance cover for personnel, equipment and facilities.
- (2) Where the electrical contracting company has been in existence for less than two (2) years, the Commission may rely on the individual experience of the key professional staff in lieu of the corporate experience of the company and the written references from the clients of such employees or a former employer.

For Official Use Only		
Recommended for Registration by:		
Effective Date (DD/MM/YY)	Expiration Date (DD/MM/YY)	
Registration No.:		
Issue Date (DD/MM/YY):	Processor:	Payment reference(s):