



**REGISTERED  
INSPECTOR**



**ELEVATING WORK PLATFORM  
ASSOCIATION OF NEW ZEALAND**

**A. APPLICANT DETAILS**

FIRST NAMES:		FAMILY NAME:	
HOME ADDRESS:			
SUBURB:		CITY:	
MOBILE NUMBER:		POSTCODE:	
APPLICANT EMAIL :			
MEMBER COMPANY NAME:			
OFFICE PYSHICAL ADDRESS:			
SUBURB:		CITY:	
COMPANY PH NUMBER:		POSTCODE:	
OFFICE EMAIL :			

**B. ALL APPLICANTS**

Accredited Registered Inspector Requirements: please complete details below and attach copies of all evidence. The more evidence to support your application, the better. In all cases, refer to the Registered Inspector Programme document for requirements

QUALIFICATION/EVIDENCE REQUIRED	CHECK	ATTACHED EVIDENCE/QUAL DOCUMENT NAME
Minimum 2 years working experience in the repair and maintenance of MEWP's		
Relevant Trade Qualification in Heavy Diesel, Auto Electrical or Hydraulics		
documented and recent history of OEM/Distributor courses attended		Use Training Course Attendance table in section "F"
Evidence of 5 x 6 monthly inspections carried out in last 3 months (under supervision of a Competent Person)		Use Inspection Experience table in section "G"
Other relevant records of training or Experience		
Referee/Sponsor statement from your employer, confirming commitment to the programme and the applicant		
Referee statement from an industry professional		
Eye Examination report (Vision certificate)		
MEWP SilverCard™ – showing US23966 + US23960-64* (US23229 where required)* Must hold US related to MEWP type to Inspect		



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**C. RECOGNITION OF SIGNIFICANT MARKET EXPERIENCE (Grandfathering application)**

Applicants through the Grandfathering system will require significant evidence of support for the application to allow the CAC to determine if accreditation is applicable and/or warrantable. Applications should include as much supporting evidence as possible to allow the CAC to determine accreditation is applicable and/or warrantable

QUALIFICATION/EVIDENCE REQUIRED	CHECK	ATTACHED EVIDENCE/QUAL DOCUMENT NAME
Section "B" completed		
Supporting alternative evidence supplied to support application where evidence cannot be provided for section "B"		

**D. APPLICANT SIGNATURE**

	CHECK	ATTACHED DOCUMENT NAME
Drivers Licence or valid NZ Passport for identification confirmation		
Supply passport sized photo of applicant for RI card in jpeg format (Head and shoulders, no face coverings or hats)		

I have verified and attached the supporting documentation/evidence shown above and declare that all the information contained in this application is true and accurate. I understand and agree that the information submitted will be entered into the EWPA database. I acknowledge that I and my employer company undertake inspections at our own risk and agree to release the EWPA of any liability to the full extent permitted by law in respect of any loss or damage from our undertakings.

<b>APPLICANT SIGNATURE:</b>		<b>DATE:</b>	
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**E. EMPLOYER SIGNATURE**

I am an authorised representative of the member company connected to this application. I can verify the application and supporting documentation/evidence supplied by the applicant and our company is true and accurate. I agree to supporting and sponsoring the applicant into the Registered Inspector program and understand our requirements as the employer of the applicant in respects to the programme. I acknowledge that we as the member company undertake inspections at our own risk and agree to release the EWPA of any liability to the full extent permitted by law in respect of any loss or damage from our undertakings.

Number of Years Applicant has been continuously employed by the member company		
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Number of Employees carrying our inspections in company (if RI, list names)		
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<b>EMPLOYER SIGNATURE:</b>		<b>DATE:</b>	
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<b>POSITION:</b>	
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**F. TRAINING COURSES ATTENDED HISTORY**

COURSE NUMBER	COURSE DATE	PROVIDER	COURSE DESCRIPTION		EVIDENCE ATTACHED
1					
2					
3					
4					
5					

**G. INSPECTION EXPERIENCE**

INSPECTION NUMBER	DATE CARRIED OUT	MAKE	MODEL	SUPERVISOR NAME	EVIDENCE ATTACHED
1					
2					
3					
4					
5					