



SECTOR Cert
GESELLSCHAFT FÜR ZERTIFIZIERUNG mbH

Büro Campus Deutz, Siegburger Str. 229c · die- 50679 Köln juergensen@sector-cert.com · www.sector-cert.com
 Amtsgericht Köln · HRB 68600 · USt.-Id: DE159849331
 Geschäftsführung: Dr. Renate Alijah · Markus-Friedrich Hagen
 Bankverbindung (D): Dresdner Bank AG · BLZ 370 800 40 · KTO 02 954 023 00
 Bank 1 Saar · BLZ 591 900 00 · KTO 106 488 002

- Application for certification according to DIN EN 473 (non-regulated area)
- Application for certification according to Directive 97/23/EG (regulated area)

Herewith I apply for initial certification renewal extension recertification

1. information on applicant

Titel:

First name, name:

Date of birth:

Born in:

Street (private address):

Postal code, town (private address)

Phone number:

E-Mail:

2. information on employer

Company name:

Street:

Postal code, town:

Contact person / function: Department:

Phone number:

Fax number:

E-Mail:

3. cost carrier

- private
- employer
- self employed

Please give us a copy of your work official license and please state your tax number

VAT.-Id: _____

4. address for invoice

(please fill in if different from employer.)

Company name:

street:

Postal code, town:

Contact person / funtion: department:

Phone number:

Fax number:

E-Mail:

5. Initial / extension according to DIN EN 473 based on the following training / exam*

Method	Le- vel	Sector **	Examination center	No. of exam	Date of exam	EN 473 ***	PED ***

- * When applying for Level 2 certification, data from Level 1 training/examination shall be given (in brackets).
When applying for Level 3 certification, data for Basic + Method + Level 2 shall be given.
- ** 1 castings (MMC), 2 forgings (MMF), 3 welds (WS), 4 tubes and pipes (MMP), 5 wrought products (MMW)
6 materials manufacturers (MM) (1+2+4+5), 7 pressure vessels (PV) (3+4+5),
9 multisector services (MS) (1+2+3+4+5)
for Infrared-Thermography: B (buildings), L (leakage), E (electrotechnique), I (industry), S (special applications)
- *** please mark all that apply;
ped = regulated sector (only for sectors 3, 7, 9) for methods MT, PT, RT, UT

6. work experience initial certification (for non-regulated area)

Please state the experience in ndt in months prior to application

method	level 1	level 2	level 3	method	level 1	level 2	level 3

7. Renewal/ recertification of an existing certification (please fill in or cross)

method	level	sector (see pt. 5)	certificate issued from	certificate no	renewal	preparation recertification with/without preparation	EN 473	PED

8. work experience for renewal / recertification

We ensure continuing satisfactory performance without significant interruption (EN 473, pt. 3.25)

9. evidence of satisfactory vision

A valid report of satisfactory vision (DIN EN 473:2008, Pt. 6.4 resp. specific requirements) is available at the employer

10. Testimonial of employer

Herewith we testify that the statements in points 5. to 9. are correct (statement by manager). The employer must inform the certification body immediately if the employment terminates or changes.

Name / function (if different from 2)

Date

Signature / Stamp

11. additional work experience in pressure vessels

Herewith it is stated the applicant has worked more than 60 days in ndt on pressure vessels within 12 months
If more than one method is to be certified a minimum of 15 days per method is needed. Work experience must not be older than 5 years. The facts are testified by:

Name of company

Address (street,no., postal code, town)

Name of nominated person

Date / signature

Please cross:

producer of pressure equipment

user of pressure equipment

nominated body

12. ID card / attachments

I apply for an ID card in addition to my certificate. Attached please find

photo (in electronic form) (juergensen@sector-cert.com, name of applicant)

13. Declaration

Herewith, I ensure that all facts mentioned in this application are true and that I know SECTOR Cert's ethical rules and that I am able to comply with them. I authorize SECTOR Cert explicitly to ask for any further information necessary to check the information given for certification. I ensure that I will inform SECTOR Cert about wrong statements in the certificate, when I no longer comply with the certification requirements or when data in the certificate have to be changed. I know that wrong data in the application form, misuse of the certificate or of the logo, violation of the ethical rules may cause the withdrawal of the certification by SECTOR Cert, which remains the owner of the certificate. I know that a certificate in RT does not automatically authorize me to work with radiation sources and that I will comply with legal rules and laws. Any complaint about the issued certificate shall immediately be reported to SECTOR Cert. I release SECTOR Cert from all claims, that might result from my work as certificated person. I agree that my personal data be stored and published in a list of certificated personnel.

Town, date

Signature of Applicant (person to be certified)