

Application for the Issue of a New Zealand Gas Industry Certificate of Competence Card (COC)



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 Jan 2021.

Employer's Details

Company Name		NZBN	
Contact Person			
Company Postal Address			
Work Phone		Work Email	

Applicant's Details

First Name		Middle Name		Last Name	
Your Home Address				Date of Birth ____/____/____	
Home Phone		Mobile		Email Address	
NZQA Number		Gasfitter Registration Number (if applicable) Please attach a copy of your <u>current</u> Gasfitter Registration card			
Signature		Date ____/____/____			

Application Type

Application Type:		New	Renewal	Replacement												
Work Type applied for (please tick): <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>1. Authorised Restricted Access</p> <p>2. Safety Induction</p> <p>3. Safe Working</p> <p>4. Gas Foundation</p> <p>5. Replace GMS <25m³/hr</p> <p>6. PE Pipelaying Only</p> <p>7. Construct PE Services</p> </div> <div style="width: 48%;"> <p>8. Construct PE Mains</p> <p>9. Construct Steel Mains & Services</p> <p>10. Standard Pressure Control</p> <p>11. Complex Pressure Control</p> <p>12. Network Leakage Response</p> <p>13. Gas Fitter - GMS Change, Disconnect &/or Reconnect</p> <p>14. Gas Fitter - Gas Leakage Response on GMS <25m³/hr</p> </div> </div>																
COC Endorsements applied for (please tick): <table border="0" style="width: 100%;"> <tr> <td>Markouts & Standovers</td> <td>Hydrostatic Testing</td> <td>Install CP Test Points</td> <td>Issue Work Permits</td> </tr> <tr> <td>Odorant Survey</td> <td>Hot Tap Steel Pipe</td> <td>Valve Maintenance</td> <td>Leakage Survey - Walking</td> </tr> <tr> <td>PE Pipe Jointing - Electro Fusion</td> <td>PE Pipe Jointing - Butt Fusion</td> <td>Cathodic Protection Survey</td> <td>Leakage Survey - Vehicle</td> </tr> </table>					Markouts & Standovers	Hydrostatic Testing	Install CP Test Points	Issue Work Permits	Odorant Survey	Hot Tap Steel Pipe	Valve Maintenance	Leakage Survey - Walking	PE Pipe Jointing - Electro Fusion	PE Pipe Jointing - Butt Fusion	Cathodic Protection Survey	Leakage Survey - Vehicle
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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 recent 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 gascertificate@iskills.co.nz. iskills may request a replacement photograph if deemed unsuitable.

Electronic photo technical requirements: File type JPG or JPEG Between 500KB (min) and 5MB (max)

Training Deviation

Where alternative qualifications and training is being provided, evidence must be submitted to either the principle contractor (if sub-contractor) or the asset owner for approval.

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 page 1 is correct, and the photograph provided of the applicant is genuine. I am authorised by the company to make such a statement.

Referee's Signature _____ Date _____

Principals – Verification of Eligibility

The following must be completed by either the Principal Contractor (if sub-contractor) or the Asset Owners Representative.

Name of Principal Contractor/Asset Owner: _____

Position: _____

Company: _____

Contact Details: Work Telephone _____ Mobile _____

I attest that the applicant on page 1 is eligible to apply for this category. Any associated training deviation has been approved where applicable. I am authorised by the company to make such a statement.

Signature _____ Date _____

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Gas Network Authorisation

Please identify the Gas Networks you are currently authorised to carry out works:

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 Renewal	Replacement
All CoC Categories	\$75.00	\$30.00

All fees exclude GST.

Please indicate how you will make payment for this CoC: Account ☐ Internet Banking ☐

Please invoice company using Purchase Order Number **(required)**:

Only customers who have approved credit can be invoiced, and payment must be received by iskills 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 finance@iskills.co.nz if you wish to apply for approved credit.

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

Payment by internet banking to account number 12-3492-0026832-00.

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Checklist

Please tick that you have completed the following:

Training

U/S T/D

I have completed the required Unit Standards or Training Deviation
(If you are not sure, check with iskills 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 (training deviation approved if applicable).

Photograph Provided

I have provided a photograph of myself

Fees

I have indicated how payment will be made on Page 3

Please return the completed form and attachments to:

gascertificate@iskills.co.nz

or

iskills
PO Box 11318
Palm Beach
Papamoa 3151

If you have any queries please contact:

iskills

Phone: 07 542 0857

Email: gascertificate@iskills.co.nz

www.iskills.co.nz