

Application for authorisation as compliance certifier

Annex E: Handler/filler assessment expertise

For the purposes of regulation 6. 6.6(3) (b) to (f) of the Health and Safety Work (Hazardous Substances) Regulations 2017

Applicant name:
Assessor name:
Date: DD / MM / YEAR

This serves to confirm that I assessed the applicant's ability to assess handlers of hazardous substances and/or fillers of gases under pressure on DD / MM / YEAR or for a period of (length) .

This assessment was conducted in relation of the following hazardous substances and/or container type (whichever is applicable).

HAZARDOUS SUBSTANCES	CLASSIFICATION	LIFECYCLES	NUMBER OF CANDIDATES ASSESSED

CONTAINER TYPES AND CAPACITY	SUBSTANCES	CLASSIFICATION	NUMBER OF CANDIDATES ASSESSED

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I confirm that the applicant has sufficient knowledge, skills and expertise with assessing handlers of hazardous substances and/or fillers of gases under pressure and has demonstrated that he/she is qualified.

I am confident that the applicant can satisfactorily undertake the assessment of handlers of hazardous substances and/or fillers of gases under pressure.

Assessor's signature:

Assessor's qualifications:

- Industry experience
- Current compliance certifier
- Former HSNO test certifier
- Former HSNO enforcement officer
- Other: (specify)

Please provide details demonstrating your knowledge, skills and experience with hazardous substances and/or gases under pressure: