

Level A Full Scope CraneSafe Certificate of Competence INDIVIDUAL ASSESSMENT APPLICATION

Operators: Please fill out this application to be assessed for your CraneSafe Certificate.
Employers: Please use the Employer Assessment Application form to book appointments for your employee(s).

IMPORTANT NOTICE:

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| <ol style="list-style-type: none"> 1. If you hold a provincial or federal crane certification, the CraneSafe Certification may be optional. Please contact our office to clarify. 2. A separate assessment must be booked for each class of crane being assessed. See www.fulford.ca for more details on crane classification. 3. The crane you will be assessed on must have up-to-date certification and the Load Chart and Log Book must be available or the assessment will not take place. 4. Space must be available to write the Load Chart & Rigging assessment. The person being assessed must have privacy. | <ol style="list-style-type: none"> 5. Outrigger pads must be available for crane set up. The floats provided with the cranes are not sufficient. 6. Adequate yard space must be available for crane set up and to perform the operating components of the assessment. 7. No power lines may be in the operating area. 8. Outside of BC, this certificate is renewable every five years. 9. The assessor will take your photograph at the time of assessment. The photo will be used for the crane operator's photo id certification card. <i>No hats or sunglasses.</i> | <ol style="list-style-type: none"> 10. If you are not found competent in one or more sections of the assessment, you may apply to be reassessed in that section. You may be reassessed up to two times before having to recommence the certification process. Reassessment fees are applicable. Study resources are available online at www.fulford.ca/links.html. |
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PRIVACY NOTE:
 Fulford Harbour Group is subject to the Personal Information Protection Act, SBC 2003, C23 ("PIPA"). We will not share personal information including the photo with any party except WorkSafeBC or its designates, the employer and the crane operator. For more details, see our Privacy Policy at www.fulford.ca.

PERSONAL CONTACT INFORMATION

If you are applying and paying for your assessment, you may request that we do not notify your employer of your assessment results. To request your results not be shared with your employer by us, please check this box:

First Name	<input type="text"/>	Middle Initials	<input type="text"/>	Last Name	<input type="text"/>
Address	<input type="text"/>			Apt/Suite	<input type="text"/>
City	<input type="text"/>	Province	<input type="text"/>	Postal Code	<input type="text"/>
Home Phone	<input type="text"/>	Cell Phone	<input type="text"/>	Fax	<input type="text"/>
Email	<input type="text"/>			Date of Birth	<input type="text"/>
Do you have a BCACS Registration #? YES <input type="checkbox"/> NO <input type="checkbox"/> If known, BCACS Registration # <input type="text"/>					
<small>Registration # is found on the BCACS Notice of Assessment.</small>					
Do you hold a Red Seal Crane Certification or Provincial Crane Certification? YES <input type="checkbox"/> NO <input type="checkbox"/>					
If yes, please list: <input type="text"/>					

EMPLOYER INFORMATION

Company Name	<input type="text"/>				
Address	<input type="text"/>				
City	<input type="text"/>	Province	<input type="text"/>	Postal Code	<input type="text"/>
Contact Name	<input type="text"/>			Title	<input type="text"/>
Phone	<input type="text"/>	Cell Phone	<input type="text"/>	Fax	<input type="text"/>
Email	<input type="text"/>				

ASSESSMENT DETAILS

Assessment Location

Address and/or Directions

Phone

Contact for Access to Assessment Site

Name

Phone:

Is a safety orientation required for our Assessor to be on your site? **YES** **NO**
 If yes, please provide information about those requirements prior to the assessment date.

Type of Crane to be Used for Re-Assessment

- Indicate the class of crane you are applying to be assessed on – choose only **one**. Upon successful completion of the assessment, this is the Certificate you will receive.
- Please provide complete crane information as the load chart portion of the assessment will be matched as closely as possible to the crane you operate.
- All weights metric.

◆ Operators applying for these crane types must be registered with the ITA prior to applying for an assessment appointment. See links below.

Mobile Crane	Qualified to Operate	Notes
Mobile Crane ◆ †	All Mobile Cranes (including Lattice Friction and Hydraulic Friction Boom). All Boom Trucks.	www.itabc.ca/program/mobile-crane-operator
Hydraulic – 80 Tonnes & Under ◆	Mobile Hydraulic – 80 Tonnes & Under All Boom Trucks	www.itabc.ca/Page861.aspx
Hydraulic – 20 Tonnes & Under	Mobile Hydraulic – 20 Tonnes & Under	

† Mobile Crane operators must have a minimum of 5,400 hours of crane-related work experience; 1,600 of these must be crane operating time (documented in a log book).

Boom Trucks	Qualified to Operate	Notes
Stiff Boom – Unlimited Tonnage ◆	All Boom Trucks	www.itabc.ca/Page860.aspx
Stiff Boom – 40 Tonnes & Under	Stiff Boom – 40 Tonnes & Under All Folding Boom Trucks	
Stiff Boom – 20 Tonnes & Under	Stiff Boom – 20 Tonnes & Under	
Folding Boom – Unlimited Tonnage ◆	All Folding Boom Trucks	www.itabc.ca/Page660.aspx
Folding Boom – 22 Tonnes & Under	Folding Boom – 22 Tonnes & Under	
Folding Boom – 10 Tonnes & Under	Folding Boom – 10 Tonnes & Under	

Tower Cranes	Qualified to Operate	Notes
Tower Crane ◆ ‡	Tower Cranes and Self Erect Tower Cranes	www.itabc.ca/Page865.aspx
Self Erect Tower Crane	Self Erect Tower Cranes	

‡ Tower crane operators must have a minimum of 1,024 hours of documented experience (log book). 500 of these must be rigging time.

Crane Type Choose one type of crane from the above list.

Type of Crane

Make

Model

PAYMENT INFORMATION

Note: If your employer is paying for your re-assessment, do not use this form. Instead, ask your employer to complete the Employer Assessment Application form available on our website www.fulford.ca or from our office 604.398.5230.

Assessment Fee <i>NOTE - Payment must be received before your assessment is scheduled.</i> Assessment fee is \$875 + \$43.75 (5% GST) = \$918.75 Payment is due at the time of application.		Type of Payment (check one): Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/>
In a Hurry for your Assessment? Contact us to expedite your appointment: toll free at 1.888.952.6033 or in the Lower Mainland 604.398.5230 or email sanja@fulford.ca		Mail certificate to: Operator <input type="checkbox"/> Employer <input type="checkbox"/>
Cheques <ul style="list-style-type: none"> Personal and business cheques are accepted. Make cheques payable to Fulford Certification For all cheques that are not honoured there is a service fee of \$50. 		Receipt Please indicate the email address where the receipt for this application is to be sent: <hr/> Email Address

Credit Card Information			
Type (check one) Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/>			
Card Number <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> <small>Visa & MC: 16 digits; Amex: 15 digits</small>	Expiry Date <input type="text"/> / <input type="text"/> <small>mm yy</small>	CVV# <input type="text"/> <input type="text"/> <input type="text"/> <small>Security Number Visa & MC: 3 digit number on back of card Amex: 4 digit number on front of card</small>	
Name on Card <input type="text"/>			
Signature _____			
Billing Address Same as Personal Information YES <input type="checkbox"/> NO <input type="checkbox"/> (if different please fill out below)			
Name <input type="text"/>		Phone: <input type="text"/> <input type="text"/> <input type="text"/>	
Address <input type="text"/>		Apt/Suite <input type="text"/>	
City <input type="text"/>	Province <input type="text"/>	Postal Code <input type="text"/>	

REFUND POLICY

If you are unable to attend your appointment, please contact the office beforehand. Cancellation and rescheduling fees will apply (see below). If you do not contact the office prior to the appointment (“No show”) your application fee will be forfeited.

<i>Fees are per Operator per Assessment</i>	Over 15 Days before Appointment	8–15 Days before Appointment	2–7 Days before Appointment	48 Hours or Less before Appointment
Cancellation Fees	\$100.00	\$275.00	\$500.00	\$875.00
Rescheduling Fees	n/a	\$200.00	\$425.00	\$875.00

INDIVIDUAL AGREEMENT

By signing you are consenting to have the results of your assessment shared with WorkSafeBC and its designates and Your Employer (unless otherwise indicated in Personal Contact Information on page 1).

Please review our refund policy carefully and by signing you are agreeing to it.

Operator Signature _____ Date _____

Mail this form (and cheque, if applicable) to Fulford CraneSafe, # 508 – 602 West Hastings Street, Vancouver, BC, V6B 1P2.
 For payment by credit card, applications can be faxed to 1.855.206.2970 or emailed to info@fulford.ca.
 For all queries, please contact our main office toll free at 1.888.952.6033 or in the Lower Mainland at 604.398.5230.