

This Application for Change of Employer applies to any crane operator who currently holds a Level B certificate.

NOTES

1. This form is for any Apprentice / Trainee operator who changes Employer and wants to continue their Trainee/Apprentice Level B certification with the new employer.
2. The new employer certificate is valid for the same crane type as the original certificate and has the same expiry date.
3. All **operational restrictions** continue to apply to the new employer Level B certification. (See right.)
4. Level B Certification is for:
 - a. registered apprentices and
 - b. trainee crane operators who are formally engaged in a workplace training program for a specific crane type.
5. A successful result on the Level B – BC Crane Operator Core Theory Exam (an online multiple choice test) is required for certification.

Operational Restrictions

1. The Level B Certificate is valid for up to one year and is renewable by application.
2. The Level B Certificate is valid for the crane type indicated below (see the attached crane type hierarchy chart).
3. A list of crane operator competencies is available online at www.fulford.ca (see crane type).
4. All **non-critical lifts** performed by the apprentice / trainee operator must be under **indirect supervision** of a **qualified supervisor**[†].
5. All **critical lifts** (as defined by WorkSafeBC) performed by the apprentice / trainee operator may only be under **direct supervision**[‡] of a **qualified supervisor**[†].

Online Core Theory Exam

If you have not already successfully completed the online core theory test:

- a. You have 30 days from the day you are registered in the online test to complete it. After 30 days, you will forfeit your application fee and will need to reapply.
- b. The online exam may be attempted a total of three times. For a second or third attempt, the Re-Application form must be submitted to Fulford with payment of an additional fee.

[†] The employer is to ensure that the **supervisor** is properly trained and that there is a **plan for supervision**.

[‡] **Direct supervision** requires that the supervisor is close enough to observe the lift and to provide verbal directions to the operator.

PRIVACY NOTE - BC Crane Safety is subject to the Personal Information Protection Act, SBC 2003, C23 ("PIPA").

OPERATOR INFORMATION

First Name	<input type="text"/>	Middle Initial	<input type="text"/>	Last Name	<input type="text"/>	
Address	<input type="text"/>				Suite	<input type="text"/>
City	<input type="text"/>	Province	<input type="text"/>	Postal Code	<input type="text"/>	
Phone	<input type="text"/>	Cell Phone	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Email *	<input type="text"/>				Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
<small>* Required</small>					<small>mmm</small>	<small>dd</small>
BC Crane Safety Identification Number	<input type="text"/>					

Crane MOBILE (Lattice Friction, Lattice Hydraulic, Mobile Hydraulic Unlimited Tonnage);
 Category MOBILE HYDRAULIC (80 Tonnes & Under, 20 Tonnes & Under); STIFF BOOM TRUCK (Unlimited Tonnage, 40 Tonnes & Under, 20 Tonnes & Under);
 (circle one) FOLDING BOOM TRUCK (Unlimited Tonnage, 22 Tonnes & Under, 10 Tonnes & Under); TOWER CRANE; SELF ERECT TOWER CRANE

OLD EMPLOYER INFORMATION

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

NEW EMPLOYER INFORMATION

Company Name

Address Suite

City Province Postal Code

Contact Name Email

Phone Cell Phone

WorkSafeBC Account Number

To create a WorkSafeBC account, go to www.worksafebc.com/insurance/registering_for_coverage/register_with_worksafebc/default.asp

PAYMENT INFORMATION

<p>Application Fee \$165.00 plus \$8.25 GST = \$173.23 per operator</p>	<p>Receipt Please indicate the email address where the receipt for this application is to be sent: Operator <input type="checkbox"/> Employer <input type="checkbox"/> Other <input type="checkbox"/> (specify below) _____ Email Address</p>
<p>Please indicate if the certificate should be mailed to the <input type="checkbox"/> Operator <input type="checkbox"/> Employer</p>	<p>Expedited Card Creation <input type="checkbox"/> Check here for Same Day card creation. - Card will be issued within 24 hours of the application being confirmed. Expedited Fee: \$80 (incl. \$3.81 GST) Total Payment: \$173.23 + 80.00 = \$253.23</p>

Credit Card Information

Type (check one) Visa MasterCard American Express

Card Number - - - Expiry Date /
mm yy
Visa & MC: 16 digits; Amex: 15 digits

CVV#
Security Number
 Visa & MC: 3 digit number on back of card
 Amex: 4 digit number on front of card

Name on Card

Signature _____

Billing Address Same as Personal Information Same as Employer Information Other (please fill out below)

Name Phone:

Address Apt/Suite

City Province Postal Code

PLAN FOR SUPERVISION

- While you do not have to submit a Supervision Plan with this application you will need to ensure that a ‘Plan for Supervision’ is in place to ensure adequate supervision of the Level B Operator named on this form.
- In the event of an incident involving any Level B operator, WorkSafeBC will request evidence from you of a Plan for Supervision covering the Level B operator.
- By signing the Supervisory agreement the Employer agrees to ensure that the Level B operator is adequately supervised at all times while operating a crane by a person or persons who understands that they are responsible for supervising the Level B operator and are qualified and competent to do so.

AGREEMENT

Please note that a Level B Card is not transferable.

When you change jobs your Level B card becomes invalid and you must submit this **Change of Employer** application to receive an updated Level B Certificate. This is because a Level B Certificate is only valid when there is a plan for supervision in place that is agreed to by all parties – trainee operator, supervisor and employer.

Apprentice / Trainee Crane Operator

I have read and understood all the conditions in this application and I agree to operate only the crane type indicated on page one (according to the crane type hierarchy) under the supervision of a qualified supervisor.

Apprentice / Trainee Crane Operator Signature

Date

New Employer

I have read and understood all the conditions in this application and I agree that there is a Plan for Supervision in place and that the apprentice / trainee crane operator will be adequately supervised while operating the crane type indicated on page one (according to the crane type hierarchy).

Employer: First Name Last Name

Employer Signature

Date

Submit Application

For payment by credit card, email applications to **info@fulford.ca**.

Or, mail this form (and cheque if applicable) to:
Fulford Certification, #508 – 602 West Hastings Street, Vancouver, BC, V6B 1P2

For all queries, please contact our main office toll free at 1.888.952.6033 or in the Lower Mainland at 604.398.5230 or at info@fulford.ca.

Level B CraneSafe Certification is administered on behalf of BC Crane Safety by Fulford Certification.

NOTE

Fulford Certification 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.

HIERARCHY OF CRANE OPERATIONS

What types of cranes can you operate?

