



APPLICATION FORM FOR LEVEL 1 REGISTRATION

This application form is to register one or more employees or subcontractors under the accreditation of:

Accreditation Name:		
Accreditation Number:		
Do you already hold the classes of accreditation you are registering for?	Yes	No (if you are adding an additional class to your level 1 accreditation, you will need to complete an additional class form)

The registration **fee of \$195** (incl. GST) is **payable for each application**. Please note, there is a limit of 5 people per registration application. Payment details are on page 4 of this form.

Ensure you submit this application form with:

1. Provide Drivers Licence, Proof of Age card or Travel Passport for each listed employee/subcontractor
2. Evidence that each person named below satisfies the qualifications/training requirements of the Australian Qualification Framework and in accordance with ASP Scheme rules (page 4 of this form)
3. When registering personnel as a subcontractor, there are additional requirements that apply – please refer to pages 2 and 3
4. Payment of the applicable **registration fee** (incl. GST) – see page 5

Employees, subcontractors or other agents of this ASP **must be registered prior to being authorised** by the **electricity distributor** to work on or near the distribution network and the work must be carried out in accordance with the requirements of the distributor’s network management plan.

Note: a fee may be payable to the local electricity distributor when applying for authorisation

***Available classes for Level 1 ASP**

1A – Overhead (OH)

1B – Underground Paper lead (UG)

1C – Underground Poly (only) (UG Poly)

1X – Electrically Unqualified (EU)

Level 1 Employee/Subcontractor Full Name (include middle name)	Class 1A (O/H)	Class 1B (U/G Paper lead)	Class 1C (U/G Poly)	Class 1X (EU)	Sub contractor Y/N <i>See Page 2 for required evidence</i>	ASP Scheme Internal Use
<i>Photo ID and evidence of qualifications/training to be attached for each person listed</i>						
<i>Eg. John Michael Citizen</i>	✓		✓		N	<i>Example Only</i>
1.						
2.						
3.						
4.						
5.						

Name: Signature:
(ASP’s nominated representative)

Date:

**APPLICATION FORM FOR
LEVEL 1 REGISTRATION****Level 1 subcontractor additional requirements**

- **If you are using subcontractors for Class 1A, 1B, 1C, you are required to provide the following with your application:**

A letter from the company each employee works for on letterhead, naming the specific employee and the class to be sub contracted, and signed by the Owner, Director, or HR representative giving permission for that employee to subcontract to you.

**Please note for Class 1A, 1B, 1C, the company you subcontract from must be an existing Accredited Service Provider (ASP)*

- **If you are using subcontractors for Class 1X you are required to provide the following with your application:**

A letter from the company each employee works for on letterhead, naming the specific employee to be sub contracted and signed by the Owner, Director, or HR representative giving permission for that employee to subcontract to you.

**Please note for Class X work, the company you subcontract from does not need to be an existing Accredited Service Provider (ASP)*

- **All subcontractor letters – *template/guide on page 3* - must be signed and dated within one month of submission**



Content requirement guide - Level 1 letter for subcontractor/s

When submitting letters for subcontractors, the company (representative) that the individual/s work for, must provide a letter that includes the requirements below:

Date (must be within one month of submission)

Name of company (sub-contracting company)

Address

Phone

ABN

ASP Number

To Dept of Planning, Industry and Environment,

I (sub-contracting company representative) give permission for the following employees to sub-contract to (your company name)

- 1. Employee name – Class (list the classes for this employee)*
- 2. Employee name – Class (list the classes for this employee)*

Regards,

*Signature of director of HR representative (sub-contracting company)
(name of director or HR representative)*

APPLICATION FORM FOR LEVEL 1 REGISTRATION

Level 1 ASP Qualification and training requirements		
Accredited Service Provider (ASP) Scheme Classes of Contestable network services (type of work)	ASP Scheme Qualification Criterion for Level 1 ASPs <i>Training organisations must be registered with Australian Skills Quality Authority or their state training authority and must have the relevant qualification and unit of competency on their scope of registration to deliver training and/or assessment</i>	
	Core Qualifications (refer Note 1)	Additional Mandatory Competency Units (refer to Note 2)
Class 1A – carry out work on or near the overhead electricity network	UET30612 – Certificate III in ESI – Power Systems – Distribution Overhead	UETDRRF11A - Testing of connections to low voltage electricity networks
Class 1B – carry out work on or near the underground electricity network including both paperlead and polymeric and associated underground asset installation works	UET30812 – Certificate III in ESI – Power Systems – Distribution Cable Jointing	UETDRCJ21A – Lay ESI electrical cables AND UETDRCJ22A – Install & maintain de-energised LV UG paper insulated cables AND UETDRCJ23A - Install and maintain de-energised high voltage underground paper insulated cables AND UETDRRF11A - Testing of connections to low voltage electricity networks
Class 1C – carry out work on or near the underground electricity network and associated underground asset installation works limited to polymeric cables only	UET30812 – Certificate III in ESI – Power Systems – Distribution Cable Jointing OR UEE30811 – Certificate III in Electro-technology Electrician (or equivalent) OR UET30612 – Certificate III in ESI – Power Systems – Distribution Overhead	UETDRCJ21A – Lay ESI electrical cables AND UETDRCJ26A – Install & maintain de-energised low voltage underground polymeric cables AND UETDRCJ27A – Install & maintain de-energised high voltage underground polymeric cables AND UETDRRF11A - Testing of connections to low voltage electricity networks
<p>Note 1: Upon verification; those holding an equivalent qualification to:</p> <ul style="list-style-type: none"> UET30612 and/or UET30812 documented in the UET12 Training Package and all corresponding units of competency that proceed back to and are inclusive of UTT30101 and/or UTT30301 documented in the UTT98 Training Package will also meet the qualification requirements noted in this Level 1 table; or UEE30811 documented in the UEE11 Training Package and all corresponding units of competency that proceed back to and are inclusive of UTE31199 documented in the UTE99 Training Package will also meet the qualification requirements noted in this Level 1 table. <p>Note 2: Registered Training Organisations (RTO's) must ensure that any/all prerequisite units of competency (as specified within each of the relevant competency standards) have been achieved prior to awarding any of the units of competency specified within the "Additional Mandatory Competency Units" column of Level 1 table.</p>		



APPLICATION FORM FOR LEVEL 1 REGISTRATION

The **Level 1 Registration Application fee** is \$195.00 (inc GST).

**Note: all fees are non-refundable*

Please forward this application form and payment to:

Email: asp.scheme@planning.nsw.gov.au

Post:

Department of Planning and Environment
ASP Scheme
PO Box 435
PARRAMATTA 2124

ASP Name: _____

Contact Name: _____

Business Address: _____

Contact Telephone Number: _____

If paying by **credit card** please complete the following section. Please note that all credit card transactions will incur a 0.4% credit card surcharge fee.

Please debit my nominated credit card account the level 1 Registration Application fee of **\$195.00***

*** Credit Card payments will incur an additional 0.4% surcharge of \$0.78**

Please tick one: MasterCard Visa

Card number: ____ / ____ / ____ / ____ Expiry date: ____ / ____

Cardholder's name (as shown on credit card) _____

Signature of cardholder: _____

Date: ____ / ____ / ____

Cheque Payment:

If paying by **cheque**, please make it payable to: **Department of Planning, Industry and Environment**

ASP Number: Internal use		Date Application Processed:	
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