**Initial Authorisation Request**

**(Request Form for Employees/Contractors who do not already hold an Electricity North West Authorisation)**

**For Official Use Only:**

Booking Reference

Interview Date

Interviewing Engineer

Employee/

Contractor Number

|  |
| --- |
| Applicant |
| **Full Name** |  |
| **ENWL Staff Number** |  |
| **Employer (contractors only)** |  |
| **N.I. Number (contractors only)** |  |
| **Craft** |  |
| **Telephone** |  |
| **Email** |  |

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| --- |
| Line Manager |
| **Name** |  |
| **Job Title** |  |
| **Address** |  |
| **Telephone** |  |
| **Email** |  |
| **I confirm that the candidate has sufficient technical knowledge and/or experience to avoid danger and is conversant with Section 7 of the Health and Safety at Work etc. Act 1974 and the requirements of the Electricity at Work Regulations 1989** |
| **Signature** |  | **Date** |  |

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| Supporting Documents (please tick)  |
|  | **Current First Aid Training / Certificate** |  | **CV detailing experience** |
|  | **Copy of Authorisations (other DNO’s)** |  | **Relevant Training Records / Certificates** |
|  | **Digital Photo – passport-style head-shot** |  |  |

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| Training / Assessment Completed |
| **Course Reference/Title:** |  | **Date** |  |
| **Course Reference/Title:** |  | **Date** |  |

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| Authorisation Codes |
|  |  |  |  |  |  |  |

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| ENWL Sponsoring Manager |
| **Name** |  |
| **Job Title** |  |
| **I confirm that the authorisation requested is required by the applicant to carry out work for Electricity North West. I have examined and approved the supporting documents as valid proof of the candidate’s competency to carry out this work** |
| **Signature** |  | **Date** |  |