

| | CP Co | nstruc | tion | Plant | F1/3 APPLIC | CATION TO R | ENEW A CPCS | COMPETENT OPERATOR CARD |
|-----------|---|-----------------------|----------|-------------------------|--|--|--|--|
| | | | | Scheme | CAPITALS using a | | | dent declaration. Please complete this form in BLOCK ure the form is completed correctly to prevent it being |
| | | • | | | returned. | licant Details | | |
| = | SECTION A | | | | Арр | | CPCS Card No. | |
| A1 | | | | | | | (if applicable) | |
| | Surname | | | | | | , ,, | |
| | Forename | | | | | | Date of Birth | |
| | Home Address | | | | | | | D D M M Y Y Y |
| | | | | | | | National Insurance No. | |
| | | | | | | | | |
| | | | | Postcode | | | Telephone | |
| | E-mail | | | | | | Number | |
| | L-IIIali | | | | | | | |
| A2 | | | | | | | nis personal data will | l be held and used in accordance with |
| | | • | • | set out in the Scho | | • | C Cahama Baaklat | |
| | In signing this form I agree to comply with the term | | | | and conditions s | set out in the CPC | Date Date | |
| | Applicant signature | | | | | M M Y Y Y | | |
| | | | | | | | | |
| | Fair Processing Notice: NOCN Job Cards shares your personal data with the Construction Industry Training Board ("CITB") for the purposes of their role as an Industrial Training Board enabling it to perform its functions under and accordance with the Industrial Training Act 1982. | | | | | | | |
| | Your data will be held securely and treated confidentially and will not be disclosed to external parties other than as required for the purposes described above, which may include sharing your information on a construction training register as well as with employers, awarding organisations or | | | | | | | |
| | | | | | | | | of ormation, please view our Privacy Notice |
| | online at https://www.nocn.org.uk/privacy/ . | | | | | | | |
| | PECTION B | | | | Othor | Qualification | 20 | |
| • | SECTION B | | | | | | | |
| | B1 CITB Health, safety and environment test *(HS&E) passed within 2 years of the date of application receipt To book a test contact the | | | | | | | |
| | | | | | | | ory being renewed as ccpcsrt.citb.co.uk) | s booking line on 0344 994 4488 |
| | | , | | | | | , | _ |
| - (| SECTION C | vement of tr | iese ies | is are <u>mandatory</u> | | Category (ie | on being returned | |
| • | C1: If you wish | to Renew | ΔII cate | egories | | | | regaries and endergements held, enter |
| | and endorseme | ents for whi | | | 62 | | | regories and endorsements held, enter at codes to be renewed in the boxes below: |
| | tick the box be | low: | | | | | | |
| | | | | | OR ^ | | \ | |
| | | | | | | | | |
| | | | | | A | | A A | A A |
| 5 | SECTION D | holow who | ro vou | would like the | Mail | ling Address | | Other (se below) |
| | Please enter | | - | would like the o | Mail | ling Address | | Other (as below) |
| • | Please enter | | - | would like the o | Mail | ling Address | | Other (as below) |
| Ş | Please enter | | - | would like the o | Mail | ling Address | | Other (as below) |
| Ş | Please enter | | - | would like the d | Mail | ling Address | | Other (as below) Postcode |
| | Please enter Company nar Address: | | - | would like the d | Mail card to be sent: | ling Address Applicant as | in Section A1 | |
| | Please enter Company nar Address: | me (if appli | cable) | | Mail card to be sent: | ling Address Applicant as dent Declara | in Section A1 | Postcode |
| | Please enter Company nar Address: SECTION E By signing thi | me (if appli | cable) | | Mail card to be sent: Independent on this applic | ling Address Applicant as dent Declara eation are corre | tion tion tion | |
| | Please enter Company nar Address: SECTION E By signing thi | me (if appli | cable) | that the details | Mail card to be sent: Independent on this applications as mention | ling Address Applicant as Applicant as dent Declara eation are corre ned in Section (| tion ct to the best of n | Postcode |
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| | Please enter Company nar Address: By signing thi above and tha Job role CPCS Validate or Tester No. | is section at they me | cable) | that the details | Mail card to be sent: Independent on this applications as mention | dent Declara eation are corrected in Section (delete as a Sign | tion ct to the best of no Goverleaf. applicable) ature | Postcode |

SECTION F Payment

APPLICATION TO RENEW A CPCS COMPETENT OPERATOR CARD

This application form is appropriate for individuals applying to renew their CPCS Competent Operator card. The applicant has to demonstrate ongoing operating experience through a choice of routes CPCS Logbook, CPCS Practical Test or On-site Assessment.

SECTION G

Terms and Conditions of CPCS Application

- 1. This form is only valid when Section E is signed by either:
 - · the CPCS Approved Company Validator where an individual has chosen the Logbook route, OR
 - the CPCS Tester who delivered the CPCS Practical Test or On Site Assessment.

Note: If renewing using a mixture of routes i.e. Logbook and On-site Assessment then Section E must be signed by the CPCS Approved Company Validator.

- 2. The CPCS Approved Company Validator, or the CPCS Test Centre is signing to confirm the requirements have been met as per below and as set out in the Scheme Booklet for Operators, including:
 - a) the applicant's details stated in section A1 and A2 are correct,
 - b) the applicant has the relevant CITB Health, safety and environment test passed within 2 years of the date of application receipt,
 - c) the applicant has the relevant CPCS Renewal test(s) passed within 2 years of the date of application receipt (for each category being renewed as indicated in Section C refer to Module Matcher cpcsrt.citb.co.uk for details).
 - d) the applicant has proven ongoing category operating ability through:
 - · recording the minimum number of hours in a CPCS Logbook, (and being endorsed competent by an Endorser) OR
 - achievement of the CPCS Practical Test delivered by a CPCS Tester through a CPCS Test Centre, OR
 - · achievement of an On-site Assessment delivered by a CPCS Tester through a CPCS Test Centre.
- 3. Application forms are subject to audit checks in accordance with CPCS requirements. Application forms, which are incorrect or not found to meet the requirements, will be returned, which will delay obtaining your CPCS card.

SECTION H

Completion Requirements

- Section A: Complete Section A with full details. Note: We will use the photo that was captured at the time you achieved the CITB HS&E test on the CPCS Competent Operator Card issued.
- Section B1: Tick the box to confirm test passed, there is no need to attach evidence of the CITB Health safety & environment test pass as this can be independently verified. To book a CITB Health, safety and environment test contact the booking line on 0344 994 4488.
- Section B2: Tick box to confirm that all relevant tests have been passed, there is no need to attach evidence of the CPCS Renewal test pass as this can be independently verified. To check which modules you need to achieve, search for Module Matcher (cpcsrt.citb.co.uk) and follow the steps. To book CPCS Renewal tests contact the booking line on 0344 994 4488.
- **Section C1:** If you wish to renew ALL the categories and endorsements for which you are entitled to tick this box, there is no need to enter the category and endorsement codes.
- **Section C2:** If you do not wish to renew ALL the categories and endorsements held on your card, please enter the category (ies) and endorsement codes you do wish to renew here.

Note: If applying for categories A61, A62 and/or A68 there is currently no On-Site Assessment available. CPCS has provided a Renewal Assessment (accessible from the website) this is employer endorsed. Please attach a copy of the completed and endorsed Renewal Assessment to this form.

- Section D: Enter the address where you wish the card to be sent here.

 Note: If a mailing address is not provided the card will be sent to the applicant's home address as provided in Section A1.
- **Section E:** This section must be signed and dated to acknowledge an independent declaration of the applicant's identity by one of the following (dependant on the route used to renew see Section G):
 - the CPCS Approved Company Validator (if renewing through the Logbook route) ensuring the CPCS Approved Company Validator number and Employer Name boxes are completed in full, or
 - the CPCS Tester (if renewing through the CPCS Practical test or On-site Assessment route), or
 - the employer representative that signed Section C of the Renewal Assessment form if applying for categories A61, A62 and/or A68 through this route, ensuring the Employer Name box is also completed.
- Section F: No Payment Due, payment for this card application was included within the CPCS Renewal test fees.
- General: Please return the completed form and copies of any additional relevant documentation to:

CPCS, NOCN Job Cards, P O Box 1242, Kings Lynn, Norfolk, PE30 9FQ

If you require help completing this form please contact CPCS on 0844 815 7274.

On receipt of this application it will usually take 15 working days to produce the card, providing all requirements have been met.