National

Technical

Committee on

Renewable

Energy

[NTCRE]

Hosted by REEEI - An Institute of the Polytechnic of Namibia

13 Storch St P Bag 13388 Windhoek Tel: +264-61-2072154 Fax: +264-61-2072059 E-mail: reeei@polytechnic.edu.na Website: www.reeei.org.na

Good day,

Please follow the procedure provided below to complete your Solar Thermal Systems Installer registration:

- Step 1 Personal details: This section requires your personal details.
- Step 2 Business details: Please provide the details if you operate as a registered business.
- **Step 3 Qualifying Category**: Chose the category which is appropriate for you
- **Step 4 Employment Verification and Experience:** At least **ONE** letter of Employment Verification should be completed by your superior if you are working for a company. This letter of Employment Verification should be attached to your registration
- **Step 5 Letter of Client verification:** If you are self employed, three letters of client verification should be completed by three different clients of your company. These letters of client verification should be attached to your registration. Please note that if you are not self-employed, you may disregard this step (Step 5).
- **Step 6 Letter of Reference: Two** letters of reference should be completed by any colleague or superior from your company. These letters of reference should be attached to your registration.
- **Step 7 Education and/or Apprenticeship:** To be completed by the applicant him/herself; Curriculum Vitae and copies of certificates must be attached to this application.
- **Step 8 Code of Ethics**: The applicant to sign acceding to upholding the professional standards of the industry
- **Step 9 Agreement and Attestation:** To be signed by the applicant agreeing to the terms and conditions of the National Technical Committee on Renewable Energy (NTRCE) and the Solar Thermal Registration
- Step 10 Check list: Application check list

The completed documents can be faxed to the **Secretariat/REEEI Coordinator** at **061-2072059**, or posted to the above address or delivered to **Office A4**, **Auditorium Building**, **Polytechnic of Namibia**, **Brahm St**, **Windhoek**.

Expect a response from REEEI within 30days of your application.

If you have any other question please contact the REEEI Coordinator on 061-2072154.

STEP 1: PERSONAL DETAILS

| Last Name: | | First Name: | | Middle: | | Suffix: | | |
|---|----------------|------------------------|-------|----------------|---------|---------|--|--|
| Mr. □ Mrs. □ Ms. □ | Date of E | Birth (dd/mm/yy) - | / / | Gender: Male 🗆 | | | | |
| Mailing Address: | | | | | | | | |
| Address line 2: | | | City: | Region: | | | | |
| Residential Address (if | different from | mailing address): | City: | | Region: | | | |
| Telephone: Code () Number (or (|) | Fax: code () Number (|) | Cell: | | | | |
| E-mail: | | | | | | | | |

STEP 2: BUSINESS DETAILS

| Do you own your Renewable Energy Business? | Yes □ | No □ | | | please provide business tion below. | | |
|--|------------|-----------------------------------|-------------|-------|--|--|--|
| Business Name: | | | Trading as: | | | | |
| | | | J | | | | |
| Registration Number: | | Date of Incorporation (dd/mm/yy)/ | | | | | |
| Mailing Address: | | | | | | | |
| Address line 2: | | City | : | | Region: | | |
| Telephone: Code() | Fax: code(|) | | Cell: | | | |
| Number () | | | | | | | |
| or (| Number(| |) | | | | |
| E-mail: | | Webs | ite: | | | | |

STEP 3: QUALIFYING CATEGORY**

| In order to be eligible for TC1/NTCRE registration, you must qualify through ONE of the categories below. Please read ALL categories carefully first. Note: CHOOSE the category which is appropriate for you by ticking the corresponding box | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| □ Four (4) years of experience installing Solar Thermal Systems. | | | | | | | | |
| □ Two (2) years of experience installing Solar Thermal Systems in addition to completion of a TC1/NTCRE – recognized training program. | | | | | | | | |
| ☐ Be an existing licensed contractor in good standing in solar or mechanical-construction related areas with one (1) year of experience installing Solar Thermal Systems. | | | | | | | | |
| □ Four (4) years of HVAC, mechanical, pipe-fitting or plumbing-related experience working for a licensed contractor, including one (1) year of experience installing Solar Thermal Systems. | | | | | | | | |
| 5. ☐ Three (3) years experience in the Ministry of Labour approved mechanical construction trade apprentice program, including one (1) year of experience installing Solar Thermal Systems | | | | | | | | |
| ☐ Two (2)-year mechanical construction-related, or engineering technology, or renewable energy technology/technician qualification from an accredited educational institution plus one (1) year of experience installing Solar Thermal Systems. | | | | | | | | |
| 7. ☐ Four-year mechanical construction related or engineering degree from an educational institution, including one (1) year experience installing Solar Thermal systems. | | | | | | | | |
| **Note: For these purposes, experience in installing Solar Thermal systems requires one year in a responsible role on the job installing Solar Thermal systems, in the role of foreman, supervisor, site manager, or experienced worker performing Solar Thermal installation work without direct supervision. Each year of experience requires an average of 2 installations. For example, if you are applying under category '1', you must list 8 installations. Please Note Again : Choose the category which is appropriate for you. | | | | | | | | |

STEP 4: EMPLOYMENT VERIFICATION & EXPERIENCE

Hands-on experience is required for registration. Please document employment in a manner to demonstrate sufficient experience for the qualifying category (Step 3 of this Application) you have selected. For the purposes of registration, one (1) year of experience = one year in a responsible role on the job installing Solar Thermal systems, in the role of foreman, supervisor, site manager, or experienced worker performing Solar Thermal installation work without direct supervision. Each year of work in the Solar Thermal field must include the installation of at least two Solar Thermal systems (minimum 2 domestic solar water heating systems) at different sites. List employment in chronological order, starting with most current employment and include a job description summarizing responsibilities and number of/type of systems installed. In addition, a supervisor will need to sign off on your current employment in an attached letter. If you are or were self-employed, provide a detailed description of your work and sign off on it.

| 1. Employer Business N | lame: | | | | | | |
|-------------------------------------|----------------------------------|---|--|--|--|--|--|
| Physical Address: | | Postal Addre | ess: | | | | |
| City: | | Region: | | | | | |
| Supervisor Name: | yyyy) o: / / | Estimated number of installations in which you participated: Telephone number: | | | | | |
| Position: Supervisor's e-mail addre | ess: | | | | | | |
| Solar Thermal Installation | on -minimum 2 domestic | c solar water | heating systems at different sites | | | | |
| Dates Job Performed | a) Job Location: Physic | | <u> </u> | | | | |
| | Place; | Region; | | | | | |
| | b) System Owner/Oper | | | | | | |
| | Name; | Tele | phone Number; | | | | |
| Total System size | c) System Components | s: Number & | size of collectors, tanks, etc.; | | | | |
| m² (optional) | Solar Thermal Collectors, Others | | | | | | |
| | Evacuated tube □ Flat | plate collector | · 🗖 | | | | |
| What type is the system? | Hot Water □ C | R Pool Hear | ting | | | | |
| Supervisor's signature: | | | Date: | | | | |
| employment, list dates for | each position, beginning w | ith your curren | ties. If your position changed during this t or most recent position. Describe you role in the installations. Use additiona | | | | |
| | | | | | | | |

STEP 5: LETTER OF CLIENT VERIFICATION

(Attesting to work by the self employed) (Applicant: Please provide (3) client verifications. Photocopies are acceptable.)

The following information verifies the Contractor/Consultant and duties of the above applicant for TC1/NTCRE Solar Thermal Installer Registration.

Note: If Self-Employed Furnish 3 Client Verifications

| 1. Name of Client: | | Name of Company (if applicable): | | | | | | |
|---------------------------------|-----------------------|--|--|--|--|--|--|--|
| Mailing Address: | Mailing Address: | | | | | | | |
| Address line 2: | Address line 2: | | | | | | | |
| City: | Region: | | | | | | | |
| Telephone: Code () Number (| Fax: code | () | | | | | | |
| or (|) Number (|) | | | | | | |
| E-mail: | | | | | | | | |
| Solar Thermal Installat | tion -minimum 2 do | mestic solar water heating systems at different sites | | | | | | |
| Dates Job Performed | a) Job Location: P | hysical Address: | | | | | | |
| | | | | | | | | |
| | Place: | Region: | | | | | | |
| | b) System Owner/0 | Operator: | | | | | | |
| | Nieuses | Televilses Alexadore | | | | | | |
| Tatal Occidence size | Name: | Telephone Number: | | | | | | |
| Total System size | c) System Compor | nents: Number & size of collectors, tanks, etc.: | | | | | | |
| m ² (optional) | Solar Thermal Colle | ectors, Others | | | | | | |
| , , | Evacuated tube □ | Flat plate collector □ | | | | | | |
| What type is the system? | Permitting and in | nspection authority: (attach copies of inspection with dates incorporated) | | | | | | |
| Hot Water □ OR | | | | | | | | |
| Pool Heating □ | | | | | | | | |
| If no permit or | | | | | | | | |
| inspecting authority | | | | | | | | |
| was available, explain | | | | | | | | |
| | fication: I performed | solar installation work in the job described above as a self- | | | | | | |
| employed individual. | | | | | | | | |
| Signature | | Date | | | | | | |

STEP 5: LETTER OF CLIENT VERIFICATION (By Client)

| The ab | ove (| contract | or/co | nsul | tant h | nas pro | ovided | d ser | rvice(| s) to c | ur hou | se/pr | opert | y fron | n: | | | |
|--------------------|--------|----------------------|--------|-------|---------|----------|--------|-------|--------|---------|--------|-------|---------|--------|------------|--------|--------|-------|
| From: | / | 1 | | to: | 1 | / | | | | | | | | | | | | |
| Please fully. P | | cribe in e includ | | | | | | the | appl | icant. | Attacl | h des | scripti | ons i | f nec | essar | y to a | nswer |
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| Are you | u sati | sfied wi | th the | e wo | rk do | ne and | d perf | orma | ance | of the | systen | n? Ye | es 🗆 | 0. | R 1 | Vo □ | | |
| To the | best | of my k | nowle | edge | e, I he | reby a | attest | that | the a | bove i | nforma | ation | is true | e and | corre | ect. | | |
| Name o | of pe | rson su | pplyir | ng in | forma | ation: _ | | | | | | | | _ (| Plea | se typ | e or p | rint) |
| Official | Title | of Res | ponde | ent: | | | | | | | | | | | | ı | | |
| Signatu | ıre: _ | | | | | | | | | | _Date: | | | | | _ | | |
| | | | | | | | | | | | | | | | | | | |

STEP 5: LETTER OF CLIENT VERIFICATION (cont....)

(Attesting to work by the self employed) (Applicant: Please provide (3) client verifications. Photocopies are acceptable.)

| 2. Name of Client: | | Name of Company (if applicable): | | | | | | |
|--|------------------------|---|--|--|--|--|--|--|
| Mailing Address: | | | | | | | | |
| Address line 2: | | | | | | | | |
| City: | | Region: | | | | | | |
| Telephone: Code () Number (|) | Fax: code () | | | | | | |
| or (|) | Number () | | | | | | |
| E-mail: | | | | | | | | |
| Solar Thermal Installat | tion -minir | mum 2 domestic solar water heating systems at different sites | | | | | | |
| Dates Job Performed | a) Job Lo | .ocation: Physical Address: | | | | | | |
| | Place: | Region: | | | | | | |
| | b) Syste | em Owner/Operator: | | | | | | |
| | Name: | Telephone Number: | | | | | | |
| Total System size | c) Syster | m Components: Number & size of collectors, tanks, etc.: | | | | | | |
| | | | | | | | | |
| m² | Solar The | ermal Collectors, Others | | | | | | |
| (optional) | _ , | | | | | | | |
| NAME OF THE PROPERTY OF THE PR | | ed tube Flat plate collector | | | | | | |
| What type is the system? | Permittin permits/c | ng and inspection authority: (attach copies of inspection certificates with dates incorporated) | | | | | | |
| Hot Water □ | | | | | | | | |
| OR Pool Heating □ | | | | | | | | |
| Foortiealing L | | | | | | | | |
| If no permit or | | | | | | | | |
| inspecting authority | | | | | | | | |
| was available, explain | | | | | | | | |
| | fication: | performed solar installation work in the job described above as a self- | | | | | | |
| employed individual. | | | | | | | | |
| Signature | | Date | | | | | | |

STEP 5: LETTER OF CLIENT VERIFICATION (By Client)

| The ab | ove c | ontractor/c | onsul | tant ha | s provide | d ser | vice(s) to | our com | pany from: | | | |
|-----------|---------|----------------------------|---------|----------|-----------|--------|--------------|--------------|--------------|-----------|----------------|----|
| From: | 1 | 1 | to: | 1 | / | | | | | | | |
| | | ribe in full include er | | | | f the | applicant | Attach | descriptio | ns if nec | essary to answ | er |
| | | | | | | | | | | | | |
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| Are you | u satis | sfied with th | ne woi | rk done | and per | forma | ance of the | e system | ? Yes □ | OR | No □ | |
| To the | best o | of my know | /ledge | , I here | by attest | that | the above | informat | tion is true | and corre | ect. | |
| Name o | of per | son supply | ring in | formati | on: | | | | | _ (Please | type or print) | |
| If not th | ne sys | tem owner | r, then | state r | elationsh | nip: _ | | | | | | |
| Signatu | ıre: _ | | | | | | | _Date: _ | | | _ | |

STEP 5: LETTER OF CLIENT VERIFICATION (cont....)

(Attesting to work by the self employed) (Applicant: Please provide (3) client verifications. Photocopies are acceptable.)

| 3. Name of Client: | | Name of Company: | | | | | | |
|---|--------------|--|--|--|--|--|--|--|
| Mailing Address: | | | | | | | | |
| Address line 2: | | | | | | | | |
| City: | Re | egion: | | | | | | |
| Telephone: Code () Number (|) | Fax: code () | | | | | | |
| or (|) Nu | umber () | | | | | | |
| E-mail: | | | | | | | | |
| | tion -minimu | um 2 domestic solar water heating systems at different sites | | | | | | |
| Dates Job Performed | a) Job Loca | cation: Physical Address: | | | | | | |
| | Place: | Region: | | | | | | |
| | , • | Owner/Operator: | | | | | | |
| Tatal Oceatawa alaa | Name: | Telephone Number: | | | | | | |
| Total System size | c) System (| Components: Number & size of collectors, tanks, etc.: | | | | | | |
| m² (optional) | Solar Therm | rmal Collectors, Others | | | | | | |
| (000.0) | Evacuated t | tube □ Flat plate collector □ | | | | | | |
| What type is the system? | Permitting | and inspection authority: (attach copies of inspection rtificates with dates incorporated) | | | | | | |
| Hot Water □ | | | | | | | | |
| OR | | | | | | | | |
| Pool Heating □ | | | | | | | | |
| If no permit or | | | | | | | | |
| inspecting authority | | | | | | | | |
| was available, explain | iootion. Las | orformed color installation work in the job described above as a | | | | | | |
| self-employment veril self-employed individual | | erformed solar installation work in the job described above as a | | | | | | |
| Signature | • | Date | | | | | | |
| | | | | | | | | |

STEP 5: LETTER OF CLIENT VERIFICATION (By Client)

| The abo | ove co | ntractor/c | consul | tant has | s provide | ed serv | vice(s) | to ou | ır hous | se/prop | erty fro | m: | | | |
|------------|--------|---------------------------|---------|----------|-----------|---------|---------|-------|---------|---------|----------|--------|---------|---------|-------|
| From: | 1 1 | | to: | 1 | / | | | | | | | | | | |
| | | ibe in full include er | | | | of the | applica | ant. | Attach | descr | iptions | if nec | essary | / to ar | nswer |
| | | | | | | | | | | | | | | | |
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| | | on supply | | | | | | | | | | | or prir | nt) | |
| If not the | e syst | em owne | r, then | state r | elations | hip: | | | | | | | | | |
| Signatu | re: | | | | | | | Date | : | | | | | | |

STEP 6: LETTER OF REFERENCE

Two letters of reference should be completed by any colleague or superior from your company. These letters of references should be attached to your registration.

FIRST REFERENCE **APPLICANT TO FILL IN** Name: Address: City: Region: LETTER OF REFERENCE (REFEREE TO FILL IN) Name: Name of Company: Physical Address: Postal Address: City: Region: Telephone: Fax: Email: The above named applicant I have known personally from: I am personally familiar with the professional work of the applicant. No □ If yes, please state relationship and brief description of character of work. Do you know any reason why candidate should be denied registration? Yes □ No □ If yes, please state reason. To the best of my knowledge, I hereby attest that the above information is true and correct. Name of person supplying information (referee): (Please type or print) Official title of Referee: Referee's signature: Date:

STEP 6: LETTER OF REFERENCE (cont....)

SECOND REFERENCE

| ADDITIONALE TO ELL IN: | | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| APPLICANT TO FILL IN | T | | | | | | | |
| Name: | | | | | | | | |
| Address: | | | | | | | | |
| City: | Region: | | | | | | | |
| LETTER OF REFERENCE (REFEREE TO FILL IN) | | | | | | | | |
| Name: | | | | | | | | |
| Name of Company: | | | | | | | | |
| Physical Address: | Postal Address: | | | | | | | |
| City: | Region: | | | | | | | |
| Telephone: | Fax: | | | | | | | |
| Email: | | | | | | | | |
| The above named applicant I have known personal | The above named applicant I have known personally from: | | | | | | | |
| I am personally familiar with the professional work of the applicant. Yes □ No □ If yes, please state relationship and brief description of character of work. | | | | | | | | |
| Do you know any reason why candidate should be denied registration? Yes □ No □ If yes, please state reason. | | | | | | | | |
| To the best of my knowledge, I hereby attest that | the above information is true and correct. | | | | | | | |
| Name of person supplying information (referee): | | | | | | | | |
| (Please type or print) Official title of Referee: | | | | | | | | |
| | | | | | | | | |
| Referee's signature: | Date: | | | | | | | |

STEP 7 - EDUCATION AND/OR APPRENTICESHIP

(For entry options 2, 5, 6 and 7 in STEP 3: Qualifying Category)

| If your qualifying category requires education, copies or official transcripts attesting to your attendance and qualifications earned will need to be attached to the application. For the purpose of registration, TC1/NTCRE will accept training to meet entry requirement option (2) when the training meets the following outcomes: | | | | | | | | | |
|---|---|--|--|--|--|--|--|--|--|
| a) a minimum (| of 40 hours cu | mulative (can include product training, etc.) format (with a teacher-learner structure) | | | | | | | |
| 2. Two experience Solar Ther | (2) years of installing mal systems dition to of a | Complete at least 40 hours of training. List training courses completed along with Contact hours for each (teacher-learner class time). Attach transcripts and/or proof of attendance. Total Contact Hours Completed: | | | | | | | |
| experience Ministry approved constructio apprentice including of | of Labour mechanical n trade | Attend a Ministry of Labour-approved apprenticeship program for at least 3 years. Indicate apprenticeship programme sponsor and give a programme description and dates. Attach proof of completion. | | | | | | | |
| mechanica construction engineering or renewatechnology qualification accredited institution year of installing Systems. | n-related, or g technology, able energy /technician n from an educational plus one (1) experience solar Thermal | Indicate institution and certificates/diploma earned (dates) and attach proof of completion. | | | | | | | |
| engineering from an institution, one (1) yea | n related or | Indicate institution and degree earned (dates) and attach proof of completion. | | | | | | | |

STEP 8 - CODE OF ETHICS:

The applicant to sign acceding to upholding the professional standards of the renewable energy industry.

The Code of Ethics of the Photovoltaic Installer requires applicants to uphold professional standards that allow for the proper and ethical discharge of their responsibilities and maintain the integrity of the credential. Through the establishment of the Code of Ethics, the TC1/NTCRE seeks to assure the highest standards of behaviour and principles in the renewable energy industry. As an applicant, I agree to uphold and abide by the TC1/NTCRE Code of Ethics. I will:

- deal with all clients, consumers, and other professionals and professional organizations fairly and in a timely manner.
- provide safe and quality services to clients and consumers,
- respect and promote the rights of clients and consumers by offering only professional services that I
 am qualified to perform, and by adequately informing clients and consumers about nature of
 proposed services, including any relevant concerns or risks,
- maintain the confidentiality and privacy of all client and consumer information,
- avoid conduct which may cause a conflict with client or others,
- engage in moral and ethical business practices, including accurate and truthful representations concerning professional information and system performance expectations,
- be truthful with regard to research sources, findings, and related professional activities,
- maintain accurate and complete business and professional records,
- respect the intellectual property and contributions of others,
- Further the professionalism of renewable energy industry services.

| I fully understand and | agree to | each and a | all of the | terms se | et forth | above |
|------------------------|----------|------------|------------|----------|----------|-------|
|------------------------|----------|------------|------------|----------|----------|-------|

| Signature: | Date: / | 1 |
|-----------------|---------|---|
| Printed Name: _ | | |

STEP 9: AGREEMENT AND ATTESTATION

Applicant agrees and attests to the terms and conditions of the Technical Committee One/National Technical Committee on Renewable Energy (TC1/NTCRE) and the Solar Thermal Registration

By signing this agreement below, I represent and agree to the following terms and conditions related to the Technical Committee One/National Technical Committee on Renewable Energy (TC1/NTCRE) and the Solar Thermal Installer Registration:

- 1. I understand and accept all TC1/NTCRE registration policies, procedures, and requirements.
 - * I agree to satisfy, and conduct myself in accordance with, all TC1/NTCRE policies and procedures, and any decisions or policies issue by the TC1/NTCRE or its authorized representatives, as currently constituted and as amended.
 - I agree that if TC1/NTCRE determines that my compliance with a TC1/NTCRE policy, procedure, other requirement, or any of the terms of this agreement requires or includes an explanation, additional information, and/or supporting documents, I will provide a complete and accurate response and true copies of the materials to TC1/NTCRE in a timely manner.
 - * I agree that any refusal or failure to provide true, timely, and complete responses to questions in this application, renewal forms, or to other TC1/NTCRE requests for information may lead to further investigation, and/or sanctions by TC1/NTCRE, including the denial or revocation of a registration.
 - I agree that the TC1/NTCRE has the right to communicate with any person, government agency, or organization to review or confirm the information in this registration application or any other information related to my application or Solar Thermal Installer Registration.
 - I agree that TC1/NTCRE may investigate my professional standing.
 - I agree to, and authorize the release of, any information requested by TC1/NTCRE for such review and confirmation.
 - * I agree that all documentation that I submit to TC1/NTCRE will become the property of TC1/NTCRE, and that TC1/NTCRE is not obliged to return any of these documents to me.
 - * I agree to notify TC1/NTCRE in a timely manner, of any changes concerning the information I have provided, including address and telephone number information.
 - * I agree that information related to my participation in the TC1/NTCRE registration process may be used in an anonymous manner for research purposes, and for other lawful purposes.
 - * I agree that upon designation as a registered Solar Thermal Installer by TC1/NTCRE, my professional contact information will be considered public information and may be made available to the public upon request.
 - I agree that my Solar Thermal Installer Registration does not imply authorisation to practice as a Solar Thermal Systems installer.
 - * I understand and accept that the contents of all TC1/NTCRE test and examination related information and materials shall be held strictly confidential, and that the entire ownership interest in this information and materials is held and controlled by TC1/NTCRE.
 - * I agree not to discuss, share, distribute, reproduce in any manner, or otherwise disclose the specific content of the Solar Thermal Installer assessment that TC1/NTRCE may carry out related information and materials to any individual or organization.
- 2. I understand and accept that, in appropriate circumstances as determined by the TC1/NTCRE and its representatives, TC1/NTCRE reserves the sole and exclusive rights to: suspend, cancel, revoke, or otherwise terminate any eligibility, registration decisions, and any rights or privileges related to the Solar Thermal Installer Registration process; and, suspend or terminate candidate examination privileges, exam scoring, or other assessment evaluation activities. Among other circumstances, the suspension or termination of assessment that TC1/NTRCE may carry out or other privileges, and the issuance of remedial and/or disciplinary actions, will be authorized, where: a specialty registration application or testing irregularity or impropriety occurs; a candidate or registered Solar Thermal Installer engages in misconduct or other conduct contrary to TC1/NTCRE policies and requirements; or, registration eligibility information or testing scoring or evaluation results are determined to be invalid for any other reason.
- 3. I agree that all disputes relating in any way to my Solar Thermal Installer application and assessment will be resolved solely and exclusively by means of TC1/NTCRE policies, procedures, and rules.
- 4. I certify that the information I have provided with respect to this application is accurate and complete. I understand that any misrepresentations or incorrect information provided to TC1/NTCRE can result in discipline or sanctions, including registration ineligibility, suspension, or revocation.
- I release, discharge, and indemnify TC1/NTCRE, its Secretariat, officers, examiners, employees, attorneys, representatives, and agents from all liability and claims that may arise out of, or be related to, my professional practice and related activities.
- 6. I release, discharge, and indemnify TC1/NTCRE, its Secretariat, officers, examiners, employees, attorneys, representatives, and agents from any actions, suits, obligations, damages, claims, or demands arising out of, or in connection with, this application, TC1/NTCRE examination activities, or any other action taken by the TC1/NTCRE with regard to its registration activities, including, but not limited to, all actions related to ethics policies and matters. I understand and agree that any decision concerning my qualifications and eligibility for

any specialty registration, and my continuing qualification for any specialty registration rests within the sole and exclusive discretion of the TC1/NTCRE and that these decisions are final.

I fully understand and agree to each and all of the terms set forth above.

| | - | |
|------|---|--------------------------------------|
| Sig | Signature: Date: / / | |
| Prir | Printed Name: | |
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| | | |
| SI | STEP 10: CHECK LIST | |
| _ | | |
| | □ Did you accurately complete the Personal Details Section of□ Did you accurately complete the Business Details Section of | • • |
| | ☐ Did you select the Qualifying Category option that best d | |
| | Solar Thermal industry? | recention your expension in the |
| | ☐ Did you accurately complete the Employment Verification | Section and incorporate a letter |
| | signed by your current supervisor (unless you are self-emp | |
| | Did you accurately complete the Client Verification Section | and attach a 3 letters signed by |
| П | your clients (if you are self-employed)? □ Did you attach copies of permit(s) and/or inspection | certificates for Solar Thermal |
| _ | installations listed? | Certificates for Goldi Tricimal |
| | | nstallations listed (such as letters |
| | from the customer, photos, and design plans, a letter from | |
| | ☐ Did you attach 2 letters of Reference from your colleagues | |
| Ц | ☐ Did you submit certified copies of official transcripts for | |
| П | qualifications required for the Qualifying Category you have Did you put your NAME at the top of each page of the apple | |
| | ☐ Did you put your NAME at the top of each attachment? | ilication: |
| | ☐ Did you read the Code of the Ethics and sign? | |
| | ☐ Did you read the Agreement and attestation and sign? | |
| | ☐ Did you make a COPY of the entire application form an | d supporting documentation for |
| | your own reference? | |