



Test Site Application




PRACTICAL EXAMINATIONS—RIGGER PROGRAMS

Please type or print neatly.

HOST COMPANY REPRESENTATIVE		TEST SITE NUMBER	
HOST COMPANY NAME		COMPANY REP EMAIL	
HOST COMPANY MAILING ADDRESS			
CITY		STATE	ZIP
CITY		STATE	COUNTRY
COMPANY REP OFFICE PHONE		COMPANY REP MOBILE PHONE	
TEST SITE ADDRESS (Physical address of where the crane(s) will be set up; P.O. Boxes not acceptable)			<input type="checkbox"/> This is a Secure Test Site. (Submit completed Security Requirements Report.)
CITY			
CITY		STATE	ZIP
CITY		STATE	COUNTRY
RIGGER PROGRAMS TO BE TESTED AT THIS SITE (CHECK THE APPROPRIATE BOX):			
<input type="checkbox"/> RIGGER LEVEL I <input type="checkbox"/> RIGGER LEVEL II <input type="checkbox"/> BOTH RIGGER LEVEL I <u>AND</u> RIGGER LEVEL II			
CHECK BOXES AS APPROPRIATE			
<input type="checkbox"/> \$50 Site Fee for _____ (year) enclosed <input type="checkbox"/> \$50 Site Fee for _____ (year) already paid <input type="checkbox"/> This is my first test administration			
TEST SITE COORDINATOR NAME		TEST SITE COORDINATOR PHONE	
TEST SITE COORDINATOR EMAIL			
PRACTICAL EXAMINER NAME		PRACTICAL EXAMINER EMAIL	
The Test Site Coordinator or Company Representative assumes total responsibility for the following items:			
1. Verification that candidate's application for the Practical Exam is complete.			
2. Abiding by NCCCO Practical Test Site Audit requirements			
SIGNATURE		DATE	

METHOD OF PAYMENT FOR TEST SITE FEE

Do not send cash.

<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> Personal check enclosed	<input type="checkbox"/> Employer check enclosed	<input type="checkbox"/> Money order enclosed	<i>Please do not staple your check or money order.</i>
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If paying by credit card, please complete the following information:

CREDIT CARD NUMBER	<input type="text"/>	EXPIRATION DATE	<input type="text"/>
NAME (Print as it appears on card)	<input type="text"/>	SIGNATURE (on card)	<input type="text"/>
		SECURITY CODE*	<input type="text"/>

* Three- or four-digit code located on your card.

Email credit card receipt to: _____

Checks and money orders should be payable to: NCCCO

Please return this Test Site Application and fee to:

National Commission for the Certification of Crane Operators
Western Regional Office
5250 S. Commerce Drive, Suite 100, Murray, Utah 84107
Phone: 801-363-2693 / Fax: 801-363-3806 / Email: ppacheco@nccco.org