## Test Site Application

### PRACTICAL EXAMINATION—SIGNALPERSON

Please type or print neatly.

<table>
<thead>
<tr>
<th>HOST COMPANY REPRESENTATIVE</th>
<th>TEST SITE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOST COMPANY NAME</td>
<td>COMPANY REP EMAIL</td>
</tr>
<tr>
<td>HOST COMPANY MAILING ADDRESS</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
<tr>
<td>COMPANY REP OFFICE PHONE</td>
<td>COMPANY REP MOBILE PHONE</td>
</tr>
</tbody>
</table>

**CHECK BOXES AS APPROPRIATE**

- $50 Site Fee for _____ (year) enclosed
- $50 Site Fee for _____ (year) already paid
- This is my first test administration

<table>
<thead>
<tr>
<th>TEST SITE ADDRESS (Physical address of where the crane(s) will be set up; P.O. Boxes not acceptable)</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
<th>COUNTRY</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>TEST SITE COORDINATOR NAME</th>
<th>TEST SITE COORDINATOR PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRACTICAL EXAMINER NAME</td>
<td>PRACTICAL EXAMINER EMAIL</td>
</tr>
</tbody>
</table>

**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

**METHOD OF PAYMENT FOR TEST SITE FEE**

- [ ] Personal check enclosed
- [ ] Employer check enclosed
- [ ] Money order enclosed

**Do not send cash.**

If paying by credit card, please complete the following information:

- CREDIT CARD NUMBER
- EXPIRATION DATE
- SECURITY CODE* (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

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