CERTIFICATE



OF COMPLETION

This Certification Is Hereby Awarded To:

SCAN ME!

Juan carlos Ibarra

OPERATOR SIGNATURE×

The above individual has completed course requirements in compliance with OSHA regulations under OSHA Code 29 CFR 1910 1926 Permit-Required and Non-Permit Confined Space Standard



CONFINED SPACE

ON-SITE EVALUATION
SIGNATURE OF TEST ADMINISTRATOR & DATE

NOF-1737567553-2409-98949

CERTIFICATION ID#



01/22/2025

COURSE COMPLETION DATE

01/22/2027

COURSE EXPIRATION DATE

OFFICIAL WALLET CARD



Certification ID# : NOF-1737567553-2409-98949

Awarded : 01/22/2025 Expires : 01/22/2027

This Card Certifies That The Below Individual Has Successfully Completed The Objectives & Examination in Accordance with the Curriculum of the NOF Certification & Training Program.

Operator Signature :

Juan carlos Ibarra Confined Space Certified



