

ASSURE SAFETY NZ

CERTIFIED HANDLER CERTIFICATE APPLICATION FORM

Complete table below with appropriate details

| | |
|--------------------------------------|--|
| Applicant's Name | |
| Company Name | |
| Contact Details (Email and Phone) | |
| Date of Application | |

Office Use Only:

Assessment Complete:

Application Criteria met:

Compliance Certifier details:.....

Signature:

Date:

PART 1: APPLICANT AND EMPLOYER (PCBU) DETAILS**Applicant's Personal Details**

| | |
|-------------------------------|--|
| Applicant's Name | |
| Date of Birth | |
| Residential Address | |
| Any disabilities or Allergies | |
| Date of Application | |
| Mobile number/s | |

Employer's (PCBU's) Details

| | |
|--------------------------------------|--|
| PCBU Registered Name | |
| PCBU Trading Name | |
| Business Address | |
| New Zealand Business Number | |
| Date of Application | |
| Contact Person Name and Phone Number | |

PART 2: HAZARDOUS SUBSTANCES LIFECYCLE PHASES AND QUALIFICATIONS

Lifecycle Phases

Please provide a list of the triggering hazardous substances for which you are applying for a Certified Handlers Certificate (CHC) and the HSNO Classification/s triggering the requirement to hold a Compliance Certificate.

Note: At least 1 appropriate triggering substance (e.g. 6.1A, 6.1B, Agrichemicals, Fumigant or VTA) must be identified and a lifecycle phase selected (e.g. Storage; Use etc.)

| Name of Hazardous Substance | Triggering HSNO Classifications | Transportation | Storage | Use | Disposal |
|-----------------------------|---------------------------------|----------------|---------|-----|----------|
| | 6.1 A and 6.1B | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Qualifications

I confirm that I hold the following formal hazardous substance qualifications:

(Please tick (✓) the appropriate boxes – you must tick at least one box and proof of competency must be provided.

| Qualification | Yes | No |
|---|-----|----|
| Unit 31291: Demonstrate knowledge of hazardous substances relevant Certified Handlers | | |
| Unit 31290: Demonstrate knowledge of the safe management and potential adverse effects of hazardous substances in the workplace | | |

Alternatively, please provide details of other formal hazardous substances training which may be accepted as a means of demonstrating equivalent knowledge and skills.

Experience

I have handled hazardous substances for the purpose of work for: Years: _____ Months: _____

I have handled the hazardous substances for which I need a Certified Handler Compliance Certificate for: Years: _____ Months: _____

Briefly describe your experience handling hazardous substances. In particular, any experience handling the hazardous substance/s in the lifecycle phase/s for which you need a Certified Handler Compliance Certificate. Include any details relating to the conditions of this handling, e.g., your role, whether as a supervisor or worker, in sole charge or under direct supervision. List the hazardous substances handled, the purpose and/or application of these substances, and any application equipment used.

PART 3: Certified Handler Certification Process

Conditions

The Compliance Certifier reserves the right to seek additional evidence of compliance, including the right to interview, observe and/or reassess an Applicant, to determine their eligibility for Certification at any time during the Application process.

Prerequisites

An Applicant must be able to:

Demonstrate knowledge of hazardous substances relevant to Certified Handlers.

Provide evidence of having successfully achieved New Zealand Qualifications Authority (NZQA) Unit Standard 31291 *or*

Be able to demonstrate equivalent knowledge and skills.

Evidence Requirements

An Applicant must provide evidence of their knowledge and experience of handling class 6.1A and 6.1B hazardous substances, *compliant to the Health and Safety at Work (Hazardous Substances) Regulations 2017*, which includes:

- An ability to read, interpret and manage workplace Inventory, Safety Data Sheets (SDS), emergency response plans, tracking and application records.
- An ability to manage the triggering hazardous substances in the life cycle phase/s for which CHC certification is sought (e.g. for their manufacture, transport, storage, use and/or disposal phase/s).

Personal Details

In order to process your Application, the Compliance Certifier requires certain personal and employment information, which is detailed in Part 1 of the Application. The provision of this information is a mandatory requirement under the HSW (HS) Regulations of 2017.

Terms and Conditions of Engagement

The Terms and Conditions of Engagement are set out in Part 4 of this application form.

The Applicant and their employer must read, complete and sign acceptance of the Compliance Certifier's Terms and Conditions. Failure to do so may lead to delay in processing the application.

Disclaimer

This Application process relates to an assessment of an Applicant's eligibility for a CHC only.

Part 4 Terms and Conditions of Engagement:

1. Confidentiality: Information provided in support of this application shall remain confidential, subject to reasonable access by WorkSafe New Zealand (WorkSafe) and/or its auditors.
2. Conflicts of Interest: Potential conflicts of interest must be made known to all parties.
3. Application Period: The Applicant should complete the Application process within one month unless prior arrangements have been made. Any extension to this period is to be provided prior to the application period expiry date.
4. Application Costs: Application fees must be paid prior to the Application process unless prior arrangements have been made.

5. Additional Costs: Additional costs relating to this application, such as those incurred as a result of any inquiries by WorkSafe during the term of a CHC Certificate, may be on-charged to the Applicant or their Employer (PCBU).
6. Complaints/Appeals: Any complaint, or appeal against a decision of a Compliance Certifier, must be made directly to the Compliance Certifier.
7. WorkSafe New Zealand: A Compliance Certifier has a duty to inform both the Applicant and WorkSafe of any grounds they must not issue a CHC Certificate.
8. Termination: An Application may be terminated by either party at any time. All outstanding fees must be paid by the Applicant or their Employer (PCBU) on notice of termination. Late payment may be subjected to administrative and interest charges.
9. Disclaimer: This Application process relates to an assessment of an Applicant's eligibility for a CHC Certificate. Compliance Certifier does not accept responsibility or liability in respect of any related or other matters.

Applicant / Employer (PCBU):

Declaration

I testify that the above information is true and correct, and I agree to the above terms and conditions.

| Applicant Name | Employer (PCBU) Name |
|----------------|----------------------|
| | |
| Signature | Signature |