

## NETWORKS Completing a ScottishPower Appendix 09 form

The following document has been written to give guidance on accurate filling of a ScottishPower Appendix 09 form. This is to prevent any unnecessary delays in the processing this form from application to completion.

REQUEST	FOR AUTHORISATION	
Part 1	Statement by Employer	or Manager :

1. Full Name of Nominee:		3.Pers / PS Ref No.		
2.Designation:	4.N.I. No			
	Contracto	r		
	Safety Passport			
5. Employer / Business Unit:				

- 1. The above section needs to have the nominee's FULL name with no abbreviations.
- 2. The designation will be the trade skill he will be employed as: i.e. HV Cable Jointer, HV Jointers Mate,
  - a. Overhead Linesman, etc.
- 3. If the nominee has held previous authorisation, then put his original number (if known)
- 4. Always input the persons National Insurance number
- 5. The company he will be employed by and is requesting this authorisation.

I confirm that in my opinion the above named **Person** is Competent to carry out the following work:-

6.Specific Contract / Site

7. Description of Work to be Carried Out:

I confirm that the candidate: has sufficient technical knowledge and/or experience to avoid danger; is conversant with Section 7 of the Health and Safety at Work etc. Act 1974, and the requirements of the Electricity at Work Regulations, 1989; is over 18 years of age.

- 6. This will either be a specific CDM site controlled by a building contractor or a contract such as with a local highway authority.
- 7. Describe the activities the person will be carrying out. LV service jointing, Unmetered disconnections/transfers. This will assist SP in allocating the correct SP authorisation codes. Carrying out jointing work is not sufficient.



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Please find herewit	h the following documentation in support of this application: (F	Please tick as appropriate)	
8. CV detailing experience (Minimum requirement)	9.Training Records / Certificates  (Linesmen – proof of Pole / Tower Top Rescue & Permanent Attachment req'd)	10.Copy Previous Auth Cert(s) and/or Certificates from other RECs	
	Expiry Date :ive Work – copy of valid First Aid Cert must be submitted when	Copy NPTC Cert. (Tree Contractors	
	or WL-2.)  much training and relevant experience information as you  g person contacting you for more information and thus ho	•	
9. Training Red 10. Copies of ar within the la 11. A valid first	ling the person's experience. (Minimum requirement) cords - 'Certificates of attendance' to courses is not evidence of ay existing valid authorisation certificates relating to any DNO of ast 10 years.  aid certificate. (Minimum requirement) when applying for any late' activities.	r previous authorisations held	
12.Signed :	Date	Ð:	
For Company/Employ	yer:		
Business Address			
Post Code: Contact Name : e-mail Address :	Tel. No. : Fax No. : Mobile No. :		
12. This must be	e signed by the authoritative person requesting the authorisation	on. This person will then be the	

contact person for all future correspondence.