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|  | HETAS Competent Person Scheme  Application Form Channel Islands |  |

**Section 1.** Business Contact Details **\*Indicates required field.**

This address and associated contact details will be shown on the HETAS website.

|  |  |  |  |
| --- | --- | --- | --- |
| **\*Business / Trading Name:** |  | **Existing HETAS ID Number** *(if applicable)***:** |  |
| **\*Responsible Person:** |  | | |
| **\*Position in Company:** |  | | |
| **Approved Contact** *(who can discuss but not make changes to your registration)***:** | |  | |
| **\*Business Address:** |  | | |
|  |  | **\* Postcode:** |  |
| **\*Main contact number:** |  | **Second contact number *(optional)*:** |  |
| **\*Email:** |  | | |
| **Website:** |  | | |
| **\*Type of Business:** | **Sole Trader  Partnership  Limited Company  PLC  Local Authority** | | |

**Section 2.** Installer Contact Details

**Please note:** If adding more than one Installer, we need one completed application per individual.

Their email address must be different to the business email address.

Please provide one ID photo per Installer. **Photos can be taken on a phone and need to include their head and shoulders against a plain background.**

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| --- | --- | --- | --- | --- |
| **\*Installer name:** |  | | **NI number:** |  |
| **Address with postcode:** |  | | | **Shape  Description automatically generated with low confidence**  **ADD PHOTO HERE** |
| **Use same address as business:** |  |  | |
| **\*Main contact number:** |  | | |
| **\*Email:** |  | | |

**Section 3.** Training & Experience

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| Competencies are awarded based on HETAS training completed. **Please include any additional certificates outside of HETAS scope** and we can assess applications on an individual basis.  Core combustion appliance courses must be re-assessed five yearly. Other relevant courses/qualifications used for  evidence of competence may not require re-assessment. |

**Section 4.** Supporting Documents

**You need to enclose the requested supporting documentation** **listed here** with your application.

Your documents must be personalised with your business name and contact details.

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| --- | --- |
| \* Your **Public Liability Insurance** policy schedule **-** *You should have cover for solid fuel installations and any other business activities with a minimum of level of £2 million* |  |
| \* Your **customer complaints** - you should keep records for at least six years |  |
| \* Your **risk assessment** - you should always provide this before commencing any work |  |
| \* Your **contract of work / written quotation** |  |

**If you don’t already have these in place, templates are available at:** [**www.tinyurl.com/hetas-forms-and-documents**](http://www.tinyurl.com/hetas-forms-and-documents)

**Section 5.** Registration Fees

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| **New Business Application** - *includes 1st Installer and assessment fees* | £973 |
| **Additional Installer** - *applicable for any Installer added after the 1st Installer* | £102 |
| **Annual Renewal** | £423 |
| **Direct Debit\* Administration Fee** *- added to either New Business or Annual Renewal fee* | £15.60 |

Form prices shown are correct at the time of print – please see our live price list at [**www.hetas.co.uk/price-list**](http://www.hetas.co.uk/price-list)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **How would you like to pay?** | | | | | | | | | |
| **BACS** |  | | Account name: HETAS Limited, Sort code: 20-20-15, Account number: 63478262 (Barclays Bank). Please use your business name as the payment reference. | | | | | | |
| **Card** |  | | We will contact you upon receipt of your application to arrange card payment. | | | | | | |
|  | | | | | | | | | |
| **Direct Debit\*** *\*initial payment  of £550 required* |  |  | | **Account number:** |  | **Sort code:** |  | **Account name:** |  |
| *Please note, opting to pay for registration via Direct Debit means all payments need to be made regardless*  *of whether or not the business and/or registrants remain live on the scheme for the full year.* | | | | | | |  |

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| **Section 6.** Declaration  **Unspent Convictions**   |  | | --- | | If anyone applying to be registered has any unspent convictions or any restrictions have been placed on them when present in a premises with vulnerable adults or children, you will need to complete and return the Unspent Convictions Declaration Form with your application: [**www.hetas.co.uk/trade/schemes/unspent-convictions-declaration-form**](https://www.hetas.co.uk/trade/schemes/unspent-convictions-declaration-form).  You can find government guidance at: [**tinyurl.com/ROA-1974**](https://tinyurl.com/ROA-1974) |   **Personal Data**  In order to maintain HETAS registration, we must hold registrant data which relates to the information provided in this document.  By signing this form, you consent to us using this data in line with our privacy policy: [**www.tinyurl.com/Hetas-DataProcessing**](http://www.tinyurl.com/Hetas-DataProcessing)  You can unsubscribe from communications relating to your registration at any time by emailing: [**hello@hetas.co.uk**](mailto:hello@hetas.co.uk) |  |

**Declarations**

***If you are both the Responsible Person and the Installer, please type or sign your full name in both fields:***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | ***By signing this form, I confirm that all the information provided is accurate and that I have read and agree to*** [***the Rules and Conditions of Registration***](https://www.hetas.co.uk/app/uploads/Forms-and-Documents/installer/installerEngWales/HCPSEWconditionsOfRegistration.pdf)***.***  ***If you are both the Responsible Person and the Installer, please sign your full name in both fields:*** | | | | |  |
|  | **Responsible Person:** | | | | |  |
|  | **Name:** |  | **Signature:** |  | **Date:** |  |
|  | **Installer:** | | | | |  |
|  | **Name:** |  | **Signature:** |  | **Date:** |  |
|  | | | | | | |

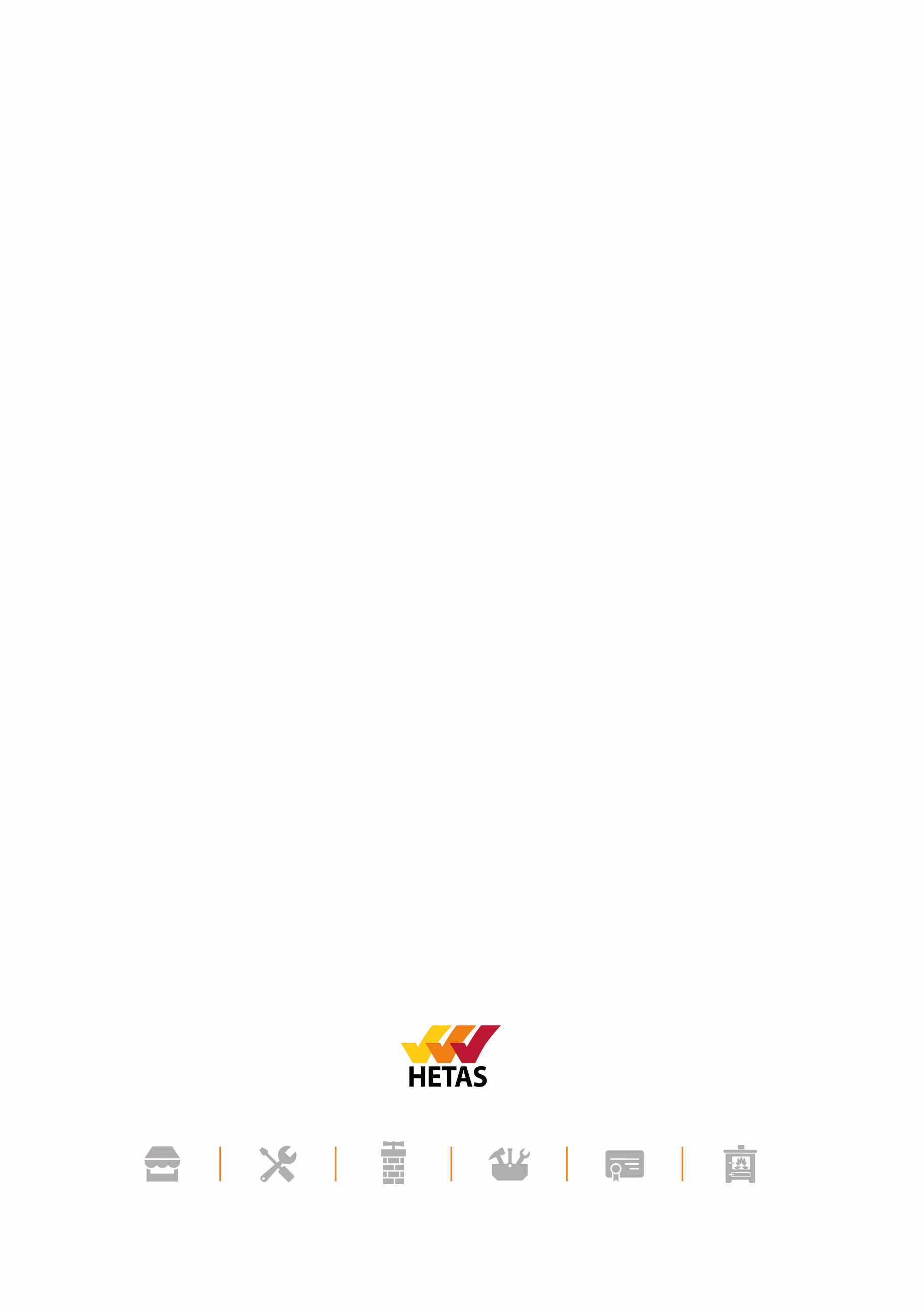
|  |  |
| --- | --- |
| **Ready to submit your application?** | |
|  | Are all sections complete and have both the Responsible Person and Installer signed the declaration?  Have you included an ID photo?  Have you provided all Supporting Documents? Don’t forget we need to see these personalised with your contact details.  Have you provided an address for your Pre-Registration Assessment? |

**What happens next?:**

* Once complete, please submit this application to [**schemes@hetas.co.uk**](mailto:schemes@hetas.co.uk) for our Business Development team to review.
* If we need additional information, we will get in touch within 48 hours, otherwise your application will be processed and your HETAS Inspector notified. They will contact you to arrange your assessment within 3 months.
* Upon completion, we will complete a final quality check and approve your application. You will receive a welcome email with your HETAS Registration Number and will now be listed on the website. An ID card will follow through the post.

**Need some support?**  
Our Business Development team are on hand to help. Give them a call on **01684 215255** or email via [schemes@hetas.co.uk](mailto:schemes@hetas.co.uk).

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