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**APPLICATION FORM FOR ELECTRICAL WIRING CERTIFICATION *MAY/JUNE 2017***

 **DOMESTIC**

 **(HOMES, APARTMENTS, ESTATES, BUNGALOWS, FLATS, COTTAGES ETC)**

 **COMMERCIAL**

 **(HOTELS, CHURCHES, MARKETS, SHOPS, BLOCK FACTORIES, FILLING STATIONS, OFFICE BUILDINGS, SCHOOLS, BANKS, SHOPPING MALLS, ETC)**

 **INDUSTRIAL**

 **(FACILITIES USED FOR INDUSTRIAL PURPOSES, FACTORIES ETC)**

 **ECG LICENSE BEFORE 2007(REGULARIZATION)**

 (Attach ECG license before 2007)

***Please make the following items available***

* ***1 passport size picture***
* ***Original copy of pay-in slip from the bank***
* *Examination Starts on* ***24TH JUNE 2017****, At 7:00am.*
* *Interview Date for ECG License Holders before 2007(Regularization) Will Be Communicated.*

**APPLICATION FORM**

Please attach 1 passport picture

**The Electrical Wiring Professional Certificate is issued to qualified personnel certified to undertake safe electrical wiring in accordance with the Electrical Wiring Regulation, 2011, L.I.2008.**

**FALSIFICATION IN FILLING OUT THIS APPLICATION IS SUFFICIENT CAUSE FOR REFUSAL TO ISSUE A REGISTRATION.**

**A. Applicants personal data (USE BLOCK LETTERS)**

SURNAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OTHER NAME (S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF BIRTH: …..… /……/……….

NATIONALITY: GHANAIAN NON-GHANAIAN (ATTACH WORKING PERMIT)

DISABILITY:  YES  NO IF YES PLEASE STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEX: MALE FEMALE  EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE NUMBER (MOBILE): OTHER:

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SPECIFIC PLACE OF WORK: AREA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TOWN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REGION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. Examination / Registration Centre (tick only one (1) option)**

Accra (Accra Technical Training Institute)

Kumasi (Kumasi Technical Training Institute)

Takoradi (Takoradi Technical Training Institute)

Tamale (Tamale Polytechnic)

**C. Relative’s Contact (mother, father, wife, brother, sister, etc.)**

SURNAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FIRST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLS TICK IF YOU HAVE TAKEN THE ENERGY COMMISSION’S EXAMS BEFORE**

**Upgrade** **failed**

 *(ATTACH COPY OF ENERGY COMMISSION’S ID CARD)*

NHIS /DRIVERS LICENSE No. / VOTERS ID No. / PASSPORT NUMBER/NATIONAL ID No:

***D. EXAMINATION FEE*** *(fees paid are not refundable)*

1. **DOMESTIC- GHC 300**
2. **COMMERCIAL- GHC 400**
3. **INDUSTRIAL- GHC 500**
4. **REGULARIZATION-GHC 300**

**E. ACCOUNT DETAILS**

Payment of Examination Fees must be made to **ANY** **GCB BANK Branch**

Account Name: **ENERGY COMMISSION – ELECTRICAL WIRING REGULATION**

Account no: **1011130039212**

Branch: **HIGH STREET BRANCH**

***PLEASE ATTACH ORIGINAL COPY OF PAY-IN SLIP TO THE FORM***

(Price quoted above cover only the application form and examination. Cost of ID Cards, Certificates, Stamp, and Installation Forms are not included and shall be paid for by successful applicants.)

***PLEASE NOTE:***

* ***DEFERMENT OF EXAMINATION WILL ATTRACT A PENALTY OF ¢100.00 IF DONE WITHIN 28 DAYS TO EXAMINATION.***
* ***SCHOOLS ACCREDITED BY THE ENERGY COMMISSION RUN PRE –EXAMINATION TRAINING PROGRAMS***
* ***SYLLABUS IS AVAILABLE F AT THE ENERGY COMMISSION FOR ҃GH¢40 ONLY.***
* ***CANDIDATES SHOULD COME ALONG WITH EXAMINATION MATERIALS(PENS,PENCILS,CALCULATOR, ETC)***
* ***WRITTEN EXAMINATION WILL INCLUDE ELECTRICAL WIRING DRAWING (DIAGRAMS).***

***DEADLINE FOR SUBMISSION OF FORMS IS 30TH MAY 2017.***

***F. I CERTIFY THE INFORMATION PROVIDED IS COMPLETE AND ACCURATE, AND ALSO READ AND AGREED ON ALL TERMS AND CONDITIONS.***

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 **Applicant’s Signature Date**

* **EXAMINATION WILL TAKE MORE THAN ONE (1) DAY. INTERVIEW AND PACTICALS MAY BE ON DIFFERENT DAYS.**
* **PLEASE COME ALONG WITH THE FOLLOWING MATERIALS ON THE PRACTICAL DAY**

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| **DOMESTIC** |
| ITEM | QUANTITY |
| 1.5mm2 P.V.C INSULATED CABLE | 12m(Black/Blue),15m(Red/Brown) |
| 2.5mm2  P.V.C INSULATED CABLE | 10m(Black/Blue),10m(Red/Brown),10m (Green &Yellow) |
| PATTRESS BOXES (SINGLE) | 8 |
| PATTRESS BOXES (TWIN) | 3 |
| 13A SINGLE SOCKET OUTLET | 1 |
| 13A TWIN SOCKET OUTLET | 3 |
| ASSORTED SCREWS | 1 packet |
| ONE-GANG TWO-WAY SWITCH | 3 |
| ONE-GANG ONE-WAY SWITCH | 1 |
| INTERMEDIATE SWITCH | 1 |
| BELL PUSH | 1 |
| ELECTRIC BELL (240V) | 1 |
| COOKER CONTROL UNIT | 1 |
| FIXING SCREWS ASSORTED | 1 Packet |
| BATTEN FITTING LAMP HOLDERS | 6 |

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| **COMMERCIAL** |
| ITEM | QUANTITY |
| 1.5mm2 P.V.C INSULATED CABLE | 10m (Red), 10m (Black), |
| 2.5mm2  P.V.C INSULATED CABLE | 8m (Red), 8m (Black)8m (Green &Yellow) |
| START PUSH BUTTON | 1 |
| STOP PUSH BUTTON | 1 |
| 240V ELECTRIC BELL | 1 |
| TWIN 13A SOCKET OUTLET | 1 |
| PHOTO SENSOR | 1 |
| BATTEN FITTING LAMP HOLDERS | 7 |
|  PATTRESS BOXES (SINGLE) | 4 |
| PATTRESS BOXES (TWIN) | 1 |
| SCREWS ASSORTED | 1 Packet |
| BELL PUSH | 1 |

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| **INDUSTRIAL** |
| ITEM | QUANTITY |
| 1.5mm2 P.V.C INSULATED CABLE | 10m( Red), 10m (Green &Yellow), 10m (Black) |
| 2.5mm2 P.V.C INSULATED CABLE | 12m(Red),12m(Black),12m (Green &Yellow) |
| INDICATOR LAMPS (GREEN, YELLOW AND RED) | 3 |
| START PUSH BUTTON | 2 |
| STOP PUSH BUTTON | 1 |
| PATTRESS BOXES | 8 |
| INTERMEDIATE SWITCH | 1 |
| CIRCULER BOXES | 8 |
| BATTEN FITTING LAMP HOLDERS | 3 |
| SINGLE 13A SWITCHED SOCKET OUTLET | 3 |
| ONE-GANG TWO WAY SWITCH | 2 |

**NAMES AND CONTACTS OF ENERGY COMMISSION’S REPRESENTATIVES NATIONWIDE (APPLICATION FORMS CAN BE SUBMITTED TO ANY OF THESE REPRESENTATIVES).**

|  |  |  |
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| **REGION** | **INSTITUTION / LOCATION** | **CONTACT NUMBER** |
| GREATER ACCRA | ENERGY COMMISSIONBEHIND ALLIANCE FRANCAISEAIRPORT RESIDENTIAL AREA | **0506344713****0249229306**0302813756 |
| ASHANTI REGION | SAMUEL AKUAMUAH BOATENGKUMASI TECHNICAL INSTITUTE (KTI)AGYIABE ERNEST  | 02081134050209383482 |
| WESTERN REGION | MR ESHUNTAKORADI TECHNICAL INSTITUTE (TTI)SOLOMON APPIAH | 02434781150264044463 |
| NORTHERN REGION (TAMALE) | MR VITALIS ALITAMALE POLYTECHNIC | 0244586652 |
| BRONG AHAFO REGION | A.K GYIMAHSUNYANI POLYTECHNICALEX OSEI KWAKU  | 026836243702034375070208200611 |
| CENTRAL REGION | EBO MENSAHNANA COSMOS | 05448545090261904832 |
| EASTERN REGION | NANA ADDO TETEBODANIEL BOAHEN | 02081660170342026085 |
| VOLTA REGION | MR. DIABAMR KAGBETO | 02081177130243311733 |
| UPPER EAST REGION | KANSANG RICHARD | 0206662138 |
| UPPER WEST REGION | ABUDULAI SALIFUCYRIL BAYAA | 02445809900209641839 |