

# **REGISTRATION** as an IAPA inspector

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Please complete and tick as appropriate:

### 1. INSPECTION BODY DETAILS

Name of the inspection body/ company:	
Street:	Postcode:
Town/ City:	Country:

#### **Managing director details**

First name:	Surname:
Telephone:	Email:

## 2. INSPECTOR DETAILS

First name:	Surname:
Street:	Postcode:
Town/ City:	Country:
Telephone:	Email:



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Plea	ase	tick	as	apr	ror	oriate

#### $oldsymbol{3}_{oldsymbol{ \bullet }}$ Personal qualifications required of the IAPA-registered-inspector working for the inspection body

3.1	The inspector confirms that they are familiar with all editions of EN 15567 Part 1 and 2: Ropes courses and its content.	O YES	O NO		
3.2	The inspector has got construction, operational or industry-specific inspection experience of at least 600 hours.	O YES	O NO		
3.3	The inspector in charge has carried out a total of 8 inspections on at least 2 different supporting structures and at least 2 different individual safety systems.		O NO		
	Please include the certificate (self-disclosure)				
3.4	The inspector has a valid first aid certificate.	O YES	O NO		
3.5	The inspector is an expert in inspecting load-bearing equipment.	OYES	O NO		
3.6	The inspector has completed basic or advanced training in wire rope expertise (at least 2 days).	OYES	ONO		
3.7	The inspector is an expert in PPE against falls from a height.	O YES	ONO		
3.8	The inspector has been trained in rope handling, e. g. PPE users, rope access, rope climbing.	OYES	ONO		
	Places include the cortificate				

Please include the certificate.

The inspection body ensures that the qualifications are up to date.

Place, date and legally binding signature of the inspection body