

# Application For UTILITY TREE TRIMMER CERTIFICATE

1. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Personal Email Address:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

\*If you have a third party paying for the certificate, you are granting the third party the right to view or receive a copy of your certificate and wallet card.

2. Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Supervisor Email Address:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

3. I am applying for the **first** time. Please supply the following:

- o Proof of successful completion of Utility Tree Worker Safety Training Course, including aerial trimming, within the past two years. (supply a photocopy of your letter from Olds confirming your marks)
- o Training Record Book showing additional experience performing tree work, including 600 total hours of aerial trimming near energized powerlines and 2400 hours overall, as well as completed Pages 11-24.
- o Signed Code of Conduct form.

**OR**

4. I am applying for **re-certification**. Please supply the following:

- o My current certificate number is UTT # \_\_\_\_\_
- o Supply successful completion of Utility Tree Worker Recertification course transcript from Olds College.
- o Signed Code of Conduct form.

5. Attach payment for application. All payment information is located on the back of this application form. Your application fee is non-refundable.

6. Please email complete application package to **info@pvma.ca**

~I declare the information on this application to be accurate by signing below and have your employer and a witness sign also.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employer's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness's signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Application for UTILITY TREE WORKER CERTIFICATE

1. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Personal Email Address:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

\*If you have a third party paying for the certificate, you are granting the third party the right to view or receive a copy of your certificate and wallet card.

2. Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Supervisors Email Address:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

1. I am applying for the **first** time. Please supply the following:
  - o Proof of successful completion of Utility Tree Worker Safety Training course within the past two years. (supply a photocopy of your letter from Olds confirming your marks)
  - o Training Record Book showing completed Pages 11-24 \*(some items may not apply to Tree Workers), logged hours in addition to those for course equating to a total of 2400.
  - o Signed Code of Conduct form.

**OR**

2. I am applying for **re-certification**. Please supply the following:
  - o My current certification number is UTW # \_\_\_\_\_.
  - o Supply successful completion of Utility Tree Worker Recertification course transcript from Olds College.
  - o Signed Code of Conduct form.

3. Attach payment for application. All payment information is located on the back of this application form. Your application fee is non-refundable.

4. Please email complete application package to **info@pvma.ca**

~I declare the information on this application to be accurate by signing below and have your employer and a witness sign also.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employer's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness's signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Application Fees:

UTT/UTW Application for \_\_\_\_\_

(Name of Applicant)

Member: \$210.00 (incl. gst) \_\_\_\_\_

Non- Member: \$420.00 (incl. gst) \_\_\_\_\_

Payment Options: Payment can be received by: Cheque, Money Order, Credit Card, or Email Money Transfer to [info@pvma.ca](mailto:info@pvma.ca)

If paying by Credit Card, please fill in the following information:

Type of Card: VISA \_\_\_\_\_ M/C \_\_\_\_\_ Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ CVV# \_\_\_\_\_

Name on Card: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

**IMPORTANT! Your application fee is non-refundable. Please ensure that all information is attached, and the application is signed.**

