

DOCKETED

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NATIONAL ENERGY MANAGEMENT INSTITUTE COMMITTEE

CALIFORNIA TITLE 24 MECHANICAL ACCEPTANCE TEST TECHNICIAN CERTIFICATION PROVIDER

2016 Mechanical Acceptance Test Employer Recertification Statement

To be recertified as a NEMIC-certified Mechanical Acceptance Test Employer you must complete this form in its entirety, electronically sign and date it and email it to administrator@attcp.org.

By checking this checkbox I, hereby acknowledge that I have viewed the NEMIC ATTCP webinar entitled *California 2016 Building Energy Efficiency Standards for Nonresidential Buildings – Notable Changes to the 2013 Version* and am familiar with the requirements of the *California 2016 Building Energy Efficiency Standards* as they pertain to mechanical acceptance testing.

By checking this checkbox I, hereby acknowledge that I meet all qualifications and requirements as for initial certification.

PERSONAL INFORMATION

First Name	<input type="text"/>	MI	<input type="text"/>	Last Name	<input type="text"/>
Home Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	ZIP Code	<input type="text"/>
Primary Phone Number	<input type="text"/>	Secondary Phone Number	<input type="text"/>		
Email	<input type="text"/>				

ACCEPTANCE TEST EMPLOYER (ATE) INFORMATION

Employer Name	<input type="text"/>				
Employer Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	ZIP Code	<input type="text"/>
Primary Phone Number	<input type="text"/>	Secondary Phone Number	<input type="text"/>		
Fax Number	<input type="text"/>				
ATE Certification Number	<input type="text"/>				

By signing this document, I certify that all information provided here is true and factual.

Signature

Date

Full Name