



Application to be an iATS Tester



1. Introduction

iATS is an authorised Competent Persons Scheme created for companies (including sole traders and partnerships) that carry out airtightness testing activities.

We are dedicated to ensuring that our Air Testers provide quality and accurate airtightness testing certificates for developers and building control bodies. Our leading airtightness testing scheme provides reassurance to clients that the work is carried out to a high degree of quality and integrity.

Please note that separate forms are required for all new testers, including those joining an existing iATS approved member organisation.

Please read and fully complete this application, providing us with all the information required. Insufficient detail and missing documents will result in applications being delayed.

Fees

For new applications and level of competence changes there is an initial application fee of £95.00 plus VAT. There is also an Annual Registration Fee, which is determined by:

1. the air tester level of competence you are applying for and/or
2. the number of iATS registered Testers in your organisation.

Following receipt of your application, you will receive an invoice within 2 working days. If your company already has an account with us, your usual payment terms will apply. If you are new to iATS then you will need to either set up a Direct Debit or pay the invoice by return to activate your account.

For details of the fees please contact us.



2. Level of Competence

Please tick the type of testing you would like to be registered for;

Level 1

Building compliance airtightness testing for single dwellings and other small simple buildings up to 4,000 m³

Level 2

Building compliance airtightness testing for non-simple buildings over 4,000 m³

Background Ventilation

Airtightness testing for the assessment of background ventilation of existing buildings

Please provide your training certificate with the application.

3. Applicant Information

Please complete in block capitals

Title	<input type="text"/>	Forename (s)	<input type="text"/>
Surname	<input type="text"/>		
Home Address	<input type="text"/>		
	<input type="text"/>		
		Post Code	<input type="text"/>
Email Address	<input type="text"/>		
Date of Birth	<input type="text"/>	Mobile No	<input type="text"/>
Telephone No	<input type="text"/>		

4. Company Information

Same as above

Company Name	<input type="text"/>		
Company Registration Number	<input type="text"/>		
	<small>Please write N/A if you are a sole trader.</small>		
Trading Address	<input type="text"/>		
	<input type="text"/>		
Postcode	<input type="text"/>		
Invoice Email Address	<input type="text"/>		
Company email address	<input type="text"/>		
Telephone No	<input type="text"/>	Mobile No	<input type="text"/>



5. Proof of Identity

Verification

Please provide a **colour copy** of either your; passport, photo card driving licence, Government issued identity card.

Please also enclose a passport size photograph with your application.

Photographs must be;

- In colour, not black and white
- Taken with your eyes open and eyes must be clearly visible
- Free from reflection or glare on your glasses and free from red eye
- Forward facing, and looking straight ahead
- Taken of the full head, without any covering

6. Declaration

By signing this document I declare that all the information provided is accurate and truthful. If successful, I promise to abide by the relevant iATS Code of Conduct, and will ensure any Terms, Conditions and Standards that are currently defined and may be specified in future, are followed. If successful in my application I also agree to visit the iATS lodgement portal on a regular basis (at least monthly) to ensure that I remain aware of any changes to the Terms, Standards or Codes that apply to the iATS Membership Scheme www.iats-lodgement.org.uk

I confirm I will pay all invoices relating to this account, in accordance with iATS Terms and conditions .

Applicant's Signature	<input type="text"/>	Date	<input type="text"/>
Bill Payers Name & Position	<input type="text"/>		
Bill Payer's Signature	<input type="text"/>	Date	<input type="text"/>

7. Checklist Please tick

- Application with signed and dated Declaration
- Colour copy of proof of identity (Passport or photo card Driving Licence)
- Colour passport sized photograph (If sending via email please send photo as a JPEG)
- Training certificate