

 	Reference: Author: Approved:	WA 107 J Young A Arkell	Issue: Rev: Issue Date:	01 3 12/09/2025
	Title:	Permanent Joining Personnel Approval Test Application & Agreement		

GENERAL INFORMATION (please read carefully before completing application).

This form is to be used for applicants seeking qualification(s) of permanent joining, or a retest of previously failed initial examination(s).

All applicants for examination and certification are required to fulfill the conditions and adhere to InCons permanent joining approval scheme & including all prerequisites identified.

It is your duty to notify us of any changes which may affect the validity of this application and any subsequent qualification and or certification. Failure to do so may result in legal action being taken by interested parties.

All certificates and qualifications generated remain the sole property of InCon and we retain the right to withdraw, suspend or alter the certification at any point. All certificates will be held until full payment has been made.

Certificates are issued to the certified person at the address stated on the application form (this is usually the sponsoring organisation/manufacture). If the certified person requests a different address, this is where the certification shall be sent.

InCon reserve the right to refuse an application based upon any identified or perceived threat in respect of applicant(s) location, culture, and security arrangements. This includes the safety of InCon employees or agents.

Our assessment fees are based on a fixed full day rate and then a further testing fee is charged per permanent joining test piece completed. The actual costs of assessment(s) will therefore vary according to the scope of certification being sought and the size and complexity of examination(s) being carried out. This is fully defined in the quotation issued to the applicant, sponsor, manufacturer upon successful application review. Your quotation may include time needed for travelling, especially if site visits are required. Fees and expenses are subject to VAT.

The InCon fee structure is made as simple as possible. The assessment fee is payable upon completion of the assessment, the client is invoiced for the quoted fees (and no more) with expenses if incurred (at cost).

An InCon authorised Decision Maker will make the final decision on any certification issued to the certified person.

Any queries please contact the Weld Test Manager on 0151 357 2212 or in writing to Inspection Consultants Limited, Unit 1, Factory Terrace, Rosscliffe Rd, Ellesmere Port, CH65 3BS.

Acknowledgement

- All parties will comply with the relevant provisions of the certification scheme.
- Only make claims regarding certification granted under the certified bodies scheme.
- Not to use the certification in such a manner as to bring the certification body into disrepute, and not to make any statement regarding the certification which the certification body considers misleading or unauthorised.
- To discontinue the use of all claims to certification that contain any reference to the certification body or certification upon suspension or withdrawal of certification and to return any certificate issued by the certification body.
- Understand that confidential information cannot be divulged relating to the examination process.
- Understand that I may only use the InCon and UKAS logos on issued certification and shall not use the certificate in a misleading manner.

Statement

I agree that I will undertake the desired permanent joining test in accordance with InCons scheme, which I have read and understood. I will be asked to provide identification for legitimacy purposes and that failure to provide this will result in the cancellation of my examination.

I understand that the information I provide must be true and accurate. Any falsification of data may result in withdrawal of my qualification and further action being taken. I understand that InCon retain the right to withdraw, suspend or alter the limitations of my qualification should there be a change in my circumstances and as such I have a duty of care to disclose any and all information which may affect my abilities.

I agree that I am prohibited from disclosing, publishing, reproducing or transmitting this and any material, in whole or in part, in any form or by any means, verbal or written, electronic or mechanical, for any purpose, all material provided by InCon is to be returned to InCon at the end of the candidate examination. No materials other than the test material for the examination shall be brought into the examination.

I understand that whilst the qualification and certificate are specific to me, InCon remain the owner of the certificate and that my employer or sponsor may impose a training / education repayment agreement, and this is an issue between myself and my employer/sponsor/company.

Special Assistance

Does the applicant request accommodation of special needs assistance?

InCon shall verify and accommodate special needs, within reason and where the integrity of the assessment is not violated, taking into account, national regulations.

(Further information may be requested).

Manufacturer/Sponsor				
Manufacturer/Sponsor (Name)	Representative (Name)	Position in organisation	Email Address	Address

As the manufacturer / sponsor / Representative (*signature*) I confirm that the applicant applying for certification under this permanent joining scheme meet the required prerequisites for the field of qualification being undertaken and have the necessary **experience**, **knowledge**, and **physical ability**.

Candidate Name:		Date of Birth:		Method of I.D: (Passport/Driving license etc)	
Welder ID:		Place of Birth:			
Address: (If different from manufacturer/sponsor. The address stated will be the delivery destination of my certificate.)					
Examination Type: (please highlight)			Initial	Retest	Recertification
Permanent joining field of qualification: (please highlight)	Welder	Operator	Setter	Brazer	
Location of Test: (please highlight)	InCon Facility	Client Premises	pWPS/WPS/BPS to be used:		
Job task/description: - (For example: 2" sch 80 c/s butt weld, ss nb – please state material grade)		Position:	Process(es) As defined in the Scheme document (WA106):	Gas:	Consumable type:
Desired standard(s) of qualification: (please highlight all that apply) <i>Note - No additional standards will be used in conjunction with InCons certification scheme, for the certification as a welder, operator, setter, brazer. However, previous editions of the standards identified below may be used in conjunction with our certification scheme.</i>					
BS EN ISO 9606-1: 2017	ASME IX: 2025/2023	BS EN ISO 9606-2: 2004	BS EN ISO 9606-3: 1999	BS EN ISO 9606-4: 1999	BS EN ISO 9606-5: 2000
BS EN ISO 14555: 2107/2025	AWS D1.1: 2020/2025	BS EN ISO 13585: 2012/2021/2024	BS 4872-1: 1982	BS 4872-2: 1976	BS EN ISO 14732:2012/2025
Please identify previous edition of standard if not stated above (if applicable):					
I would like to perform a job knowledge test: (leave blank if not applicable) <i>If performed the job knowledge test will be recorded on the qualification test certificate.</i>					
I require special needs assistance: (leave blank if not applicable) <i>If this box is ticked an InCon representative will be in contact to assist in this matter.</i>					
General Data Protection Regulation (GDPR) – InCon will store and use the information given on this form only for the purpose for which it has been provided. Your personal details and any other data you provide to InCon will not be passed on to a third-party without your permission. By completing this application and signing below I waive my right to confidentiality and that the certificate may be made public. I have read and fully understood the Incon Certification Scheme (WA 106) and this application form (WA 107) and wish to continue with my chosen test(s)					
Candidate Signature:				Date:	