



LANTRA

APPLICATION FOR FISS/CSCS SMART CARD

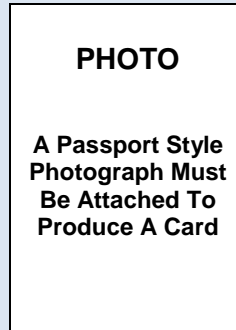


Section A – The card applicant must complete this section.

Please fill in any blank areas and tick the correct boxes using black ink and keep within the white boxes.

Is This: A First Application [] An Upgrade of an Existing Card [] Or A Renewal [] CITB HS&E Test: []

A1 Applicant Details:



FISS Accepted H&S Course: []

CSCS Registration No.: []

Surname: []

Forename: []

Home Address: []

National Insurance No.: []

Date Of Birth: (DD/MM/YYYY)

[] / [] / []

Postcode: []

Lantra Reg No / ID (If Known): []

Telephone: []

Email: []

Are You: Employed [] Self Employed [] Unemployed [] (✓ Box)

A2 Please Send My Card To: My Home Address [] The Company Address In Section C1 []

A Different Address, Which Is: [] Postcode: []

A3 I confirm to the best of my knowledge the information above is correct. I understand and agree the information on this form will be used by Lantra for the purposes of administering the FISS/CSCS scheme; this may include passing information to third parties such as Employers or Training Providers. Your data may be entered on to a secure database accessible via a website. All information obtained from this form will be held for a minimum of seven years.

Signature: [] Date: [] / [] / [] (DD/MM/YYYY)

Section B – Card Claim (You must meet the requirements of the FISS/CSCS categories as per the information listed on the reverse of this form)

B1 Please ✓ The Categories You Would Like On The Card

Colour	✓ General Fencing	✓ VRS*	Colour	✓ Gates & Barriers
Green	Fencing Labourer	VRS Labourer	Blue	Agricultural/Quarry Fence Erector
Red	Trainee Installer	Trainee Installer	Blue	Automated Gate Installer
Blue	Skilled Installer	VRS Installer	Blue	Automated Barrier Installer
Blue	Parapet (VRS*)	Temporary VRS	Blue	Electric Security Fence Installer
Gold	Supervisor	Supervisor	Blue	Erection of Parapet Railings Installer
Black	Manager	Manager	Blue	Timber Hoarding Installer

Section C – Industry Declaration (must be completed by someone in the fencing industry)

C1 The Applicant Cannot Complete This Section

I confirm that to the best of my knowledge the details provided are correct

Signature: []

Company Name: []

Date: [] / [] / []

Title & Name: []

Telephone: []

Position: []

Address: []

Postcode: []

Email: []

CHECKLIST BEFORE RETURNING THIS APPLICATION

Please ensure all sections of the form are completed correctly
The checklist below will assist with your application submission

<input type="checkbox"/>	Application form is fully completed and signed.
<input type="checkbox"/>	Evidence of health & safety training and/or qualification at the appropriate level. Please refer to the FISS/CSCS Scheme Booklet found at www.lantra.co.uk/nhss/fisscscs or visit the UK Build site at https://builduk.org/issues/training-skills/ and refer to the training standard.
<input type="checkbox"/>	Letter confirming CITB "Touchscreen Test" passed at the appropriate level. Please refer to the FISS/CSCS Scheme Booklet found at www.lantra.co.uk/nhss/fisscscs .
<input type="checkbox"/>	VRS and Parapet card applicants must have met the requirements in the NHSS 10B document found at https://www.ukas.com/technical-services/publications/publications-relating-to-certification-body-accreditation-3/ .
<input type="checkbox"/>	A passport photograph.
<input type="checkbox"/>	Application fee (£30 inc. VAT). Please make cheques and postal orders payable to Lantra, if you wish to pay by credit/debit card please provide relevant contact details as Lantra will contact you for payment.

If you need help completing this form please contact Lantra on 02476 696996
or email sector.schemes@lantra.co.uk

Please return this form and all relevant documents to:
Lantra, Lantra House, Stoneleigh Park, Nr Coventry, Warwickshire, CV8 2LG