

Individual's details:

EUSR ID _____ Date of Birth ____/____/____

First Name _____ Surname _____

Mobile No _____ Email _____

Employer's Name _____

Photo ID:

☐ Uploaded into QuartzWeb

☐ Not required (individual already on EUSR)

Employer Details:

Type of Organisation SLP ☐ WC ☐ NAV ☐

Organisations Full Name _____

Address _____

Postcode _____

Email Address _____ Website Address _____

SCMC (Water) Specified Job Role:

Please tick the role(s) being applied for:

- ☐ Competent Person (CP)
☐ Senior Competent Person (SCP)
☐ Water Company Controller (WCC)

EUSR registration pre-requisites:

Please tick to confirm that the individual has successfully completed an approved SCMC (Water) training and assessment programme and the EUSR registrations already held:

☐ Individual has completed an approved programme for SCMC (Water)

- ☐ National Water Hygiene
- ☐ SHEA Water
- ☐ Network Construction Operations (NCO) Water - Main Layer (*CP role only*)
- ☐ Scottish Water DOMS - modules 1-12 – (*for working in Scotland*)

Authorised Signatory details: *(This must be signed by an LRQA approved Authorised Signatory)*

First Name _____

Last Name _____

Position/ Job Role _____

EUSR ID _____ Date ____/____/____

Email Address _____

Contact Tel No. _____

Signature

For information on what we do with the personal details provided, please read our [Privacy Policy - EUSR](#)

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