

**Certification Services Division  
1 Spencer Parade, Northampton  
NN1 5AA, United Kingdom**

Tel: +44(0)1604-259-056.  
Fax: +44(0)1604-231-489.  
E-mail: pcn@bindt.org



## **NON-DESTRUCTIVE TESTING EMPLOYER'S AUTHORISATION**

PCN examinations consist of two parts each with several sections. A third job specific part may be carried out by the employer prior to issuing operating authorisation.

### DEFINITIONS

**Employer:** The organisation for which a candidate or certificate holder works on a regular basis; an employer may also be a candidate.

**Operating authorisation:** A written statement issued by the employer based on the individual's competence in the certification categories held. In addition to the certification, the job specific knowledge, skill and physical ability may be assessed for the specific task.

**Job Specific Examination:** A further element of the qualification procedure includes practice relating to the special inspection requirements and needs of an individual employer.

### JOB SPECIFIC EXAMINATION

Employers or AQB's may carry out the job specific part of the qualification procedure to satisfy requirements related to the employer's specific needs. PCN document CP13 - Guidelines for PCN Job Specific Endorsement - provides guidance in conducting this supplementary examination.

In circumstances where the job specific/job practical examination is considered necessary, independent documentation to satisfy company quality assurance requirements should be raised by the employer.

### OPERATING AUTHORISATION

Employers may use the form provided overleaf when authorising employees to carry out non-destructive testing on their behalf.

A separate form should be raised for each NDT certification held by the individual concerned.



The British Institute of Non-Destructive Testing is an accredited certification body offering personnel and quality management systems assessment and certification against criteria set out in international and European standards through the PCN Certification Scheme.



**PART 1 - PCN CERTIFICATE HOLDER'S DETAILS**

CERTIFICATE HOLDERS NAME: \_\_\_\_\_

PCN NUMBER: \_\_\_\_\_

CERTIFICATE NUMBER: \_\_\_\_\_

SECTOR	LEVEL	METHOD	CATEGORIES	EXPIRY

**PART 2 - EMPLOYER'S DETAILS**

DEPARTMENT: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

POST CODE: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

**PART 3 - OPERATING AUTHORISATION**

The above named individual is authorised to carry out the NDT inspection appropriate to the product or industry sector, NDT method, level and categories of inspection specified above for a period of 12 calendar months from the most recent date in column 3 below, or until the expiry date of the relevant certification held, whichever is the sooner.

Authorisation to operate is valid only when signed by a representative of the company.

AUTHORISING NAME	AUTHORISING SIGNATURE	DATE OF SIGNATURE