

COES APPLICATION FORM

Note: See page 2 for guidance on completing this form

| APPLICANT DETAILS | | | | | | | | |
|---|-------------------------------------|---------|----|---|----------------------|------------|-----------------|--|
| First Name | | | | Surname | | | | |
| Business Name | (if applicable) | | | | | | | |
| Phone No. | | | | Email ¹ | | | | |
| Lot No. | | Unit No |). | | | Street No. | | |
| Street name | | | | | | | | |
| Suburb /Town | | | | | State | • | Postcode | |
| Applicant's relat | plicant's relationship to property: | | | Customer of LEW/REC: Occupant / tenant: | | | | |
| Acronyms LEW = Licensed Electrical Worker REC = Registered Electrical Contractor Owner of | | | | property: | |] Au | thorised agent: | |
| ¹ Search results will be emailed to the above email address or posted to the Applicant street address if no email address is provided. | | | | | | | | |
| SEARCH INFORMATION - PROPERTY ADDRESS <u>OR</u> TICK IF SEARCH ADDRESS IS AS ABOVE | | | | | | | | |
| Lot No. | | Unit No | o. | | | Street No. | | |
| Street name | | | | | | | | |
| Suburb /Town | | | | | State | VIC | Postcode | |
| | | | | | | | | |
| ADDITIONAL INFORMATION (IF KNOWN) | | | | | | | | |
| Certificate of Electrical Safety (COES) number ² | | | | | | | | |
| Date electrical installation work completed (or estimate if unsure) | | | | | | | | |
| LEW Name | | | | | LEW licence No. | | | |
| REC Business Name | | | | | REC registration No. | | | |
| LEW/REC Phone No./Email address | | | | | | | | |
| LEW/REC Address | | | | | | | | |
| DECLARATION OF INTERESTED PERSON | | | | | | | | |
| I declare that I am the customer of the electrical contractor that completed the work covered by this COES, the owner or occupant of the property, or an authorised agent acting on their behalf. I have attached evidence of this ³ . The information that I have provided is true and correct and may be made available to ESV employees, including personal details such as name, addresses and phone numbers for the purpose of processing this application. I am aware that providing false or misleading information is an offence under Section 148 of the Electricity Safety Act 1998 and doing so may result in a substantial fine. Signature Date | | | | | | | | |
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Acronyms

- LEW = Licensed Electrical Worker
- REC = Registered Electrical Contractor
- COES = Certificate of Electrical Safety

Notes to the form

- 1 Certificate search results will be emailed to the above email address or posted to the Applicant street address if no email address is provided.
- 2 You may have the ability to request this information from the following sources:
 - The LEW or REC responsible for the work if known.
 - Your electricity retailer or relevant electricity distribution business where the certificate is 'prescribed' and used for the purpose of connection to supply.

A business may apply a charge for the service of locating and providing a COES number or a copy of the record. This is not within the jurisdiction of ESV to address.

- To verify yourself as an 'interested person' with a legitimate relationship to the property, you must:
 - attach a copy of a council rates, or
 - utilities notice, or
 - other equivalent document, showing your name and search property address.
 - If you are an authorised agent, you must also attach evidence of this authorisation.
 - If you are the customer of the electrician, but are not the owner or occupant, please provide a copy of the invoice for the work or other evidence of the contractual relationship between you and the electrician.
 - If you are the builder of the search address, provide a current building permit or building contract.

Please complete this form and send it with your verification documents to:

Email: coes@energysafe.vic.gov.au

or

Post: Energy Safe Victoria
COES Application Form

PO Box 262

COLLINS STREET WEST VIC 8007

If you require assistance with completing this form please email coes@energysafe.vic.gov.au or call PH 9203 9700 Option 3 for Certificates of Electrical Safety.