

HomeFit Assessor Application Form



I hereby submit my application to attend the HomeFit Assessor training.

Contact details:				
First Name	Last name			
Company	Position/Job Title			
Email	Phone			
Address	Mobile			
Prerequisite qualification: <i>(Please tick appropriate box)</i>				
I am an:	HEA	HPA	EDA	None
I am a member of:	BOINZ	NZIBI	NZIBS	
<i>Note: These organisations may be contacted for verification.</i>				
I want to be listed to perform HomeFit in the following regions: <i>(Please tick appropriate box)</i>				
Auckland	Kāpiti	Taranaki		
Bay of Plenty	Marlborough	Taupō		
Canterbury	Manawatu	Waikato		
Coromandel	Nelson	Wairarapa		
Gisborne	Northland	Wellington		
Hawkes Bay	Otago	West Coast		
Hutt	Southland	Whanganui		
I am part of a larger organisation , supplier, and want to be added to the installer list:				
Please send me information on how to be added to the installer list				
In signing this form you confirm that the information provided is true and correct.				
Signature			Date	