



<i>*Office Use Only*</i>
No.
Date Of Issue:

## Application for Registration as Distribution Electrical Operator

To: Training & Conference Coordinator  
 The MEARIE Group  
 3700 Steeles Avenue West, Suite 1100  
 Vaughan, ON L4L 8K8

This application is submitted on behalf of:

<b>EMPLOYEE NAME</b>			
<i>First Name</i>	<i>Last Name</i>		
<b>EMPLOYER NAME</b>			
<b>MAILING ADDRESS</b>			
<i>Street</i>	<i>City</i>	<i>Province</i>	<i>Postal Code</i>

### Basis for Application

An eligible applicant:

- 1) has successfully completed The MEARIE Group's Electrical Operator Training Program;
- 2) has attained journeyman status as per the utility's requirements;
- 3) is competent to:
  - Operate a power system to maintain performance within established guidelines;
  - Process requests for approval to undertake work on power systems or auxiliary equipment;
  - Apply operating practices and safety standards;
  - Carry out planned switching operations;
  - React to power system disturbances; and direct restoration operations;
  - Prepare operating records and reports;
  - Issue work protection;
  - React to electrical hazards and emergencies;
  - Communicate effectively with customers, other utilities, other work groups, fire, police, and the media as necessary, within the utility's guidelines.
- 4) and has acquired a minimum of 4 years (8000 hours) of electrical operating work experience.\*  
 \*If part of this work experience was with a different utility(s) or company(s) complete the following:

<b>NAME OF LDC/UTILITY</b>		
<b>DATES:</b>	From:	To:
<b>NAME OF LDC/UTILITY</b>		
<b>DATES:</b>	From:	To:

I hereby certify, as a duly authorized signatory on behalf of the employing LDC/company, that the above employee meets all of the above listed requirements for registration as a Distribution Electrical Operator.

<b>NAME</b>	<b>TITLE</b>
<b>SIGNATURE</b>	<b>DATE</b>
<b>UTILITY/COMPANY</b>	