

***PHIL ACKLAND CREW LEADER
CERTIFICATION
RE-CERTIFICATION APPLICATION***

Company Name: _____

Company Rep Name: _____ P. A. Qualification #: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Crew Leader Name: _____ Certification #: _____

The Pledge

I will communicate with my company representative on a written After Service Report the following information:

- That the entire exhaust system was cleaned in accordance with Section *Cleaning of Exhaust Systems* (presently 11.6 of NFPA 96 2008 Ed.)
- Any areas of the exhaust system that cannot be cleaned, with the reasons why.
- Any areas of the exhaust system that are inaccessible or unsafe work areas
- Visible serious deficiencies in the exhaust system. This is limited to my knowledge as an exhaust cleaner (section 11/6 of NFPA 96 2008) of these sorts of deficiencies.

I have read and understand the procedures for Phil Ackland's Kitchen Exhaust Cleaner Certification Protocol.

Date: _____ Crew Leader Signature: _____

Company Rep signature: _____

The Credit card information will go on a separate page

If there have been any changes to your Insurance or After Service Report scan and email

\$225/per applicant

Cardholder Name: _____ Credit card: M/C VISA DISCOVER

Credit card Number: _____ Expiry date: _____

Date: _____ Cardholder Signature: _____