

Non-Domestic BER Assessor Registration Form

1. Pre-qualification Criteria:

To join the Non-Domestic BER Register, candidates must satisfy two qualification criteria:

- 1. The first is an NFQ Level 7 degree/qualification in a building or construction related discipline.
- 2. The second is proof of membership with one of the professional bodies listed on SEAI's website at the specified grade.

Please see SEAI's website for additional supporting information on acceptable building or construction related disciplines and proof of membership/grades from acceptable professional organisations.

Please ensure that you have met the pre-qualification requirements before completing your registration to become a BER Assessor.

1a. Proof of Qualifications in a Building or Construction Related Discipline.

Please provide details of your completed NFQ Level 7 degree/qualification in a building or construction related discipline:

- Name of course;
- Name of training/course provider;
- Details and duration of relevant subjects covered, as identified on SEAI's website;

Please submit a copy of your certificate alongside your registration application.



1b. Proof of Membership in a Professional Organisation*.	
Please provide details of appropriate membership to a relevant professional body at the specified grade:	
 Name of professional body/organisation; Details of membership grade; Membership number; 	
Please submit a copy of your proof of membership alongside your registration application.	
* Please ensure your proof of membership within a professional organisation and eligible grade is listed on SEAI's approved list, available here .	



2. BER Training Course

Candidates must demonstrate the successful completion of the Non-Domestic BER Assessor Training Course with one of SEAI's registered training providers.

Candidates are required to achieve a minimum grade of 70% in order to register with SEAI as BER assessor.

Please note that all grades will be validated with the relevant BER Training Provider prior to registration.

riease ii	ote that all grades will be validated with the releva	The BER Training Provider prior to registration.
	ase provide details of your completed Non- tic BER Assessor Training Course;	
•	Name of training course;	
•	Name of training course provider;	
•	Date training was completed;	
	Grade achieved;	
•	Grade acriieved,	
Please registr	submit a copy of your certificate with your ation application.	



3. Assessor Registration Details - Public										
Please provide the below information to appear on the public register of BER assessor.										
Fields marked with an asterisk (*) indicate mandatory fields.										
Title: (Mr / Ms, etc.) *	First Name: *		Surname: *							
Company / Trading Name: (If relevant)			Registered Business Number: (If applicable)							
Business Address: *										
Email Address: *										
Website:										
Telephone / Mobile Number: *										
Locations Covered:	☐ Conr	naught								
(Tick as appropriate)	☐ Mun:	ster								
	□ Ulste	r								
	☐ Dubl									
	□ Rest	of Leinster								
4. Business Details										
Please provide Tax Clearance Details <u>or</u> attach Tax Clearance Certificate to form.										
PPSN/Tax Reference Number:										
Access Number:										



5. Assessor Registration Details - Private
Please provide the below information for use by SEAI in setting up and maintaining your BER assessor account.
Date of Birth: *
Telephone / Mobile Number: * (If different from above)
Registered Email Address: * (If different from above)
Registered BER Assessors are obliged to maintain an active email address in accordance with the scheme rules.
This email address will be used by SEAI for all official correspondence with the BER Assessor.
6. Record Keeping Details
Complete the relevant section of the registration form as outlined below. Please tick where appropriate.
Records of BER Assessments carried out by myself as a Sole Trader, will be maintained by me in accordance with the scheme rules.
<u>Or</u>
Records of BER Assessments carried out by BER Assessors registered under this Company will be maintained by this Company in accordance with the scheme rules.
I agree to allow auditors on behalf of SEAI visit and check these records if required.
7. Declaration and Signature of person to be Registered
Complete the relevant section of the registration form as outlined below.
I have read and hereby accept, as a condition of registration as a non-domestic BER Assessor, the provisions of the Code of Practice for BER Assessors, valid on today's date.
I hereby give authorisation for SEAI to verify my credentials with the listed organisations.



8. Support of BER Asses	sor Registration
Section 7 should be completed by person applying to register as a n	the person responsible for the maintenance of records, if details differ from that of the on-domestic BER assessor.
Name of Applicant: *	
Name of Employer: *	
BER Employer Number:	
	ered as an <u>Employer</u> for a Domestic or Non-Domestic BER Assessor you willhave ber by SEAI. Please enter it in the box above and proceed directly to Section 8 .
Employer's Address: *	
Employer's CRO No: *	
Employer's Registered email: *	
Employer's Contact Name:	
Website:	
Telephone:	



9. Declaration and Signature for Payment									
Section 8 should be completed by the person responsible for the payment of re	egistration and renewal fees and levies.								
I,of(Co Code of Practice for BER Assessors. In consideration of SEAI's agreement to re BER Assessor Registration Form, we undertake to the Sustainable Energy Auth	-								
 To release and indemnify SEAI against all actions, proceedings, claims out of or in connection with the execution of BER Assessments and a attach to SEAI: 	_								
 For any error, omission or malpractice arising from whatever cause in the execution of aBER Assessment carried out by a BER Assessor. 									
 For the negligent or otherwise wrongful act or omission by the E For a breach by the BER Assessor of the Regulations or of the Co 									
 To take responsibility for maintenance of such records and calculations as would be required to support and defend, should they be questioned, BER ratings carried out by the BER Assessor and 									
 To pay charges to SEAI in relation to the BER Assessor's registration, publication of Building Energy Ratings carried out by the BER Assessor account for such charges. 	_								
I undertake, further, to notify SEAI in writing if the named person in Section 3 be authorised to carry out BER Assessments, or if we decide to cease operation	_								
I understand that SEAI will provide us with monthly statements of our account activities.	related to BuildingEnergy Rating and related								
I agree to pay the registration fee, subsequent annual renewal fees and BER as accept that these fees paid to SEAI are non-refundable.	ssessment publicationlevies. I also hereby								
Name of Authorised Signatory:									
Title of Authorised Signatory:									
Signature of Authorised Signatory:	Company Stamp or Seal								
	Company Stamp or Sear								
Date://									



SEPA Direct Debit Mandate

Unique Mandate	Refer	ence	2:											3			اد				VABI		DITY	
Creditor Identifier	r:																U		OFI	REL	AND	ПО	KIIY	
By signing this ma to debit your acco Energy Authority of As part of your rigl with your bank. A Your rights are exp Please complete a	ount a of Irel hts, y refun plaine	and (I and. ou a id mi ed in	re ei ust k	our b ntitle oe cla atem	ank on to aime nent	to de a ref d wit that	bit y und thin you	our fron 8 we	acco n you eeks:	unt ur ba start	in a ank ing	ccore unde from	the the	tern date	h th	e ins	struc ondi	tio:	n fr	om :	Susta ur ag	inabl jreer	e nent	nk
*Name of Account Holder:																								
*Your Address:	ı																						1	
Address Line 1																								
Address Line 2																								
*City/postcode																								
* Country:																								
* IBAN Number																								
*Swift BIC													_											
Please post cor *Creditors Nam *Creditors Add *Address Line *Country: Ireland	ne: Si Iress I 2:Co	ustaii Line	nabl 1: P0	e Er	ergy					nd														
*Type of payment	Recu	ırren	t	\subset)	or (One-	Off I	Paym	nent		\supset	(Plea	se ti	ck √))								
*Signature(s): _												_		*D	ate	of si	gnin	ng: _		/		_/_		



BER Assessor Certificate of Insurance

*Indicates mandatory fields

Date:

This form must be completed by a Registered Insurance Broker or Agent or Insurance Company licensed to issue cover in the Republic of Ireland, as approved by the Financial Regulator. cover in the Republic of Ireland, as approved by the Financial Regulator.

Assessor / Insured De	etails:		
*Name of BER Assesso	or (s)/ Insured:		
SEAI BER Assessor Nu	mber(s):		
SEAI BER Employer No	umber:		
*Business Name as pe	er SEAI BER registration:		
*Full Business descript	tion on (as per policy):		
Public / Products Lia	ons need to be completed. Only bility Insurance: emnity minimum limit of €6,500		
*Policy No.		*Insurers:	
*Cover Start date:		*Expiration date:	
*Policy No.	surance with a minimum limite	*Insurers:	laim
*Cover Start date:		*Expiration date:	
	es directly employed by the co		Policy provides an indemnity limit of not less than €13,000,0
Policy No.		Insurers:	
Cover Start date:		Expiration date:	
required by the Sustair renewal receipts must Insurance is an ongoin The policies are Indemnity include Policy is current Please tick Assessor	nable Energy Authority of Irela be available for inspection by	nd (SEAI) for participation as SEAI or their appointed agen with SEAI and details must b blic of Ireland ere in Ireland iid Domestic, Non-Domestic,	e completed with each new policy.
*Name:	T		*Inclusive Company or Proker or Agent's Stamp
*Signed:			*Insurance Company or Broker or Agent's Stamp
*Position / Status			-



Registration Checklist

Please ensure you have obtained and provided all of the relevant below documentation to submit alongside your non-domestic BER Assessor application.

If the registration form is not fully completed with all relevant documentation it will be returned to you.

You have read and fully understand this registration form before submitting your signed application to SEAI;

You have the appropriate an NFQ Level 7 degree/qualification in a building or construction related discipline and have provided a copy of the relevant certificate(s)/proof of qualification(s);

You have successfully completed the Non-Domestic BER Training Course, have been fully certified by the relevant awarding body and have provided a copy of your certificate;

You have read and accepted the Code of Practice for BER Assessors;

Your registration application is signed, dated and all of the mandatory fields are completed;

The SEPA direct debit mandate is fully completed and signed by the relevant personnel **and the recurrent box is ticked**;

The BER Assessor Certificate of Insurance form is completed and provided as part of your application. Please ensure the BER Assessor's name is completed on the insurance form;

You have attached the Tax Clearance Certificate:

You have provided a copy of a valid photographic ID (drivers license or passport) that has been certified as valid by an Garda Siochana, Notary Public or Peace Commissioner.

Registration Fees:

A registration fee is required to register with SEAI as a Domestic BER Assessor. Registration is automatically renewed annually, and the registration renewal fee will be charged.

The registration and renewal fees and publication levies are published on:

https://www.seai.ie/register-with-seai/ber-assessor/Schedule of fees.pdf

Fees are paid by direct debit and no other payment methods are accepted. The direct debit for yourregistration and renewal fees, and BER publication levies will be collected on the 20th of the next month or the nearest working day thereafter. Fees paid to SEAI are non-refundable.

Return information:

Email completed form to: info@ber.seai.ie or by post to

SEAI, PO Box 135 Cahirciveen, Co. Kerry

If you have any queries regarding the BER Scheme, please contact:

Telephone: 01 8082054 Email: info@ber.seai.ie

