

DECLARATION FOR USE IN CONNECTION WITH THE RUNNING

OF ELECTRICAL CABLES

CONTACT DETAILS OF THE CABLE INSTALLER PERFORMING THE W	VOIKK.
Name:	
Address:	
Postal code/City:	Country:
Telephone number, if applicable:	
CVR number, if applicable:	
I HAVE RUN ELECTRICAL CABLES AT THIS ADDRESS:	
Address:	
Postal code/City:	
Detailed description of the scope of the work:	
Detailed description of the scope of the work:	
Tick off: Drawing/diagram attached.	
I HEREBY DECLARE THAT I HAVE COMPLETED A QUALIFICATION AS AN ELECTRICIAN IN ANOTHER EU OR EEA COUNTRY	
Tick off: Copy of documentary evidence of electrician's qualification p	resented/attached.
I HEREBY DECLARE THAT I HAVE COMPLETED A COURSE THAT	
 enables me as a cable installer to mount cables correctly to protect them has provided me with knowledge of types of cable, how to limit the spreatation, including electrical drawings such as wiring diagrams and cable sch enables me to select cable types and materials based on available docum 	nd of fire, electrical documen- nedules, and suitable equipment nentation
Tick off: Copy of attestation of competence in running electrical cable	s presented/attached.

I HEREBY DECLARE

 that the cables were run by me that the cabling was carried out according to currently applicable Danish installation regulations and any instructions provided by the manufacturer that, to the best of my judgement, the cables have no damage that may impair safety
Date and signature:

Updated 07-20-2017