Candidate name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The following table is to be filled in to verify relevant experience and inspection experience. External contact information required.**

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| **Dates (from-to)** | **Surface treatment experience and inspection activity (specify type, e.g. Inspection, painting, blasting, lab work, specification…)** | **Project** | **Project owner/Company** | **Project contact details (external): name, telephone and e-mail** |
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 Name of person signing Date, signature and stamp

 On behalf of company