



CANDIDATE RECERTIFICATION APPLICATION

WRITTEN EXAMINATION

Please type or print neatly.

NAME <i>First</i>			<i>Middle</i>			<i>Last</i>			
CCO CERTIFICATION NUMBER (IF PREVIOUSLY CERTIFIED)			DATE OF BIRTH			SOCIAL SECURITY #			
MAILING ADDRESS					CITY		STATE		ZIP
PHONE		CELL		FAX		E-MAIL			
COMPANY ORGANIZATION						PHONE			
COMPANY MAILING ADDRESS					CITY		STATE		ZIP

WRITTEN EXAMINATIONS FOR WHICH YOU ARE APPLYING

This application is for the purpose of recertification. You may **ONLY** recertify in the category(ies) in which you are currently certified. **BUBBLE IN** the circle next to the categories for which you are applying for recertification. If you would like to take additional examinations in which you are not currently certified. **BUBBLE IN** the examination(s) of your choice and **CHECK** (3) the load chart you want to use for the crane type. *You must also provide a copy of either a score report or certification card.*

EXAMINATIONS

RECERTIFICATION EXAMS		LOAD CHARTS (Check one for each Specialty selected)	
<input type="radio"/> Core Exam	652605	<input type="checkbox"/> American LBC	
<input type="radio"/> Lattice Boom Crawler:	652625	<input type="checkbox"/> Manitowoc LBC	
	652608		
<input type="radio"/> Lattice Boom Truck:	652611	<input type="checkbox"/> Link-Belt LBT	
	652635	<input type="checkbox"/> Manitowoc LBT	
<input type="radio"/> Large Telescopic:	652614	<input type="checkbox"/> Grove TMS TLL	
(Swing Cab)	652645	<input type="checkbox"/> Link-Belt TLL	
<input type="radio"/> Small Telescopic:	652656	<input type="checkbox"/> Manitex TSS	
(Fixed Cab)	652655	<input type="checkbox"/> Broderson TSS	
<input type="radio"/> Tower Crane:	654602		
<input type="radio"/> Overhead Crane:	653602		
ADDITIONAL EXAMINATIONS		LOAD CHARTS (Check one for each Specialty selected)	
<input type="radio"/> Core Exam	652603	<input type="checkbox"/> American LBC	
<input type="radio"/> Lattice Boom Crawler:	652620	<input type="checkbox"/> Manitowoc LBC	
	652607		
<input type="radio"/> Lattice Boom Truck:	652609	<input type="checkbox"/> Link-Belt LBT	
	652610	<input type="checkbox"/> Manitowoc LBT	
<input type="radio"/> Large Telescopic:	652612	<input type="checkbox"/> Grove TLL	
(Swing Cab)	652613	<input type="checkbox"/> Link-Belt TLL	
<input type="radio"/> Small Telescopic:	652616	<input type="checkbox"/> Manitex TSS	
(Fixed Cab)	652650	<input type="checkbox"/> Broderson TSS	
<input type="radio"/> Tower Crane:	654601		
<input type="radio"/> Overhead Crane:	653601		

FEES

RECERTIFICATION EXAM FEES	
Core Exam plus one (1) Specialty	\$150 <input type="checkbox"/>
Core Exam plus two (2) Specialties	\$155 <input type="checkbox"/>
Core Exam plus three (3) Specialties	\$160 <input type="checkbox"/>
Core Exam plus four (4) Specialties	\$165 <input type="checkbox"/>
Tower Crane (only)	\$150 <input type="checkbox"/>
Tower Crane (with mobile crane)	\$50 <input type="checkbox"/>
Overhead Crane (only)	\$150 <input type="checkbox"/>
Overhead Crane (with mobile crane)	\$50 <input type="checkbox"/>
RECERTIFICATION RETEST FEES	
<i>Core only for Retest Candidates</i>	\$150 <input type="checkbox"/>
<i>One (1) Specialty Only - Core passed</i>	\$50 <input type="checkbox"/>
<i>Two (2) Specialties - Core passed</i>	\$55 <input type="checkbox"/>
<i>Three (3) Specialties - Core passed</i>	\$60 <input type="checkbox"/>
<i>Four (4) Specialties - Core passed</i>	\$65 <input type="checkbox"/>
<i>Tower Crane</i>	\$50 <input type="checkbox"/>
<i>Overhead Crane</i>	\$50 <input type="checkbox"/>
ADDITIONAL EXAM FEES	
<i>(ONLY For Candidates adding to existing certifications)</i>	
One (1) Specialty Only	\$65 <input type="checkbox"/>
Two (2) Specialties	\$75 <input type="checkbox"/>
Three (3) Specialties	\$85 <input type="checkbox"/>
Tower Crane	\$50 <input type="checkbox"/>
Overhead Crane	\$50 <input type="checkbox"/>
Candidate Late Fee	\$50 <input type="checkbox"/>
<i>(if applicable)</i>	
Incomplete Application Fee	\$30 <input type="checkbox"/>
<i>(if applicable)</i>	
TOTAL AMOUNT ENCLOSED	\$ <input style="width: 50px;" type="text"/>

