

**OFFICE OF THE SENIOR ELECTRICAL INSPECTOR,  
ELECTRICAL INSPECTORATE**

F-101, Panchsheel Marg, Behind Bagriya Bhawan, C-Scheme, Jaipur-302001

**FORM-A**  
(see rule 9(1))

**Application for the (Grant or Renewal ) of Supervisor`s Competency to work/Wireman`s Competency to work/Permit to work as Supervisor/Permit to work as Wireman/Permit to work as Chartered Electrical Safety Engineer (Please Tick ✓ whichever is applicable)**

(Particulars to be entered in English/Hindi)

Photograph

1. Certificate/Permit No. (In case of renewal) .....
2. Applicant`s Name .....
3. Father`s Name .....
4. Full Postal Address (with Pin number) .....
- .....
- .....
5. Date of birth .....
6. Mobile No. ....Landline No. ....
7. Details of Present and past service (to be supported by copies of Certificates)

S.No.	Employer`s Name	Date of Commencement	Date of Termination	Total Period of service
1				
2				

8. Educational Details (Technical)

Name of Technical Institute and School	Degree/Certificate	Period of Education	Score (%)	Details of Training (Firm Name etc.)	Duration of Training

9. Medical Certificate :-

I hereby declare that I am medically fit to undertake Electrical work, as stated in the Medical Certificate issued by .....(Name of Doctor) working in ..... (Name of Hospital/Dispensary) as ..... (Position) (See rule 8(1) and 8(2))

10. I hereby declare that application is accompanied with the document as specified under sub-rule (2) of rule (10) of the Rajasthan Electrical Inspectorate (Formation of Technical Committee and Grant of Licence, Competency to work and permit to work) Rules, 2016”

I do hereby declare that the particulars given above are correct.

**FORM-H**  
[See rules 8(2) and 13(3)]  
**MEDICAL CERTIFICATE**



[To be filled in by a registered medical practitioner appointed for the purpose by the State Government or person authorized in this behalf by the State Government

- 1. Name of the applicant .....
- 2. Identification Marks      <sup>(1)</sup> .....
- <sup>(2)</sup> .....

- 3,
  - (a) Does the applicant, to the best of your judgment, suffer from any defect of vision? If so, has it been corrected by suitable spectacles. Yes/No
  - (b) Can the applicant, to the best of your judgment, readily distinguish the pigmentary colours, red and green? Yes/No
  - (c) In your opinion, does the applicant suffer from a degree of deafness which would prevent his • hearing the ordinary sound signals? Yes/No
  - (d) In your opinion, does the applicant suffer from night blindness? Yes/No
  - (e) Has the applicant any defect or deformity or loss of member which would interfere with the efficient performance of his duties as a supervisor or wireman? If so, give your reasons in details. Yes/No
  - (f) Optional :-
    - (i) Blood group of the applicant (if the applicant so desires that the information may be noted in his licence or permit).
    - (ii) RH factor of the applicant (if the applicant so desires that the information may be noted in his licence or permit). Declaration made-by the applicant in form I as to his physical fitness is attached.

**Certificate of Medical Fitness**

**I Certify that :-**

- (i) I have personally examined the applicant Shri/ Smt. IKum .....
- (ii) that while examining the applicant I have directed special attention to his / her distant vision;
- (iii) While examining the applicant, I have directed special attention to his/her hearing ability, the condition of the arms, legs, hands and joint of both extremities of the applicant : and
- (iv) I have personally examined the applicant for reaction time, side vision and glare recovery.  
And, therefore I certify that :-
  - (a) To the best of my judgment, he is medically fit to hold licence/ certificate/ permit.
  - Or**
  - (b) The applicant is not medically fit to hold a licence/certificate/permit for the following regions.  
.....

Signature :

- 1. Name designation of the medical officer/Practitioner (Seal)
- 2. Registration number of Medical Officer.

Date : Signature or thumb impression of the candidate.

**Note :-**

- 1. The medical officer shall affix his signature over the photograph affixed in such a manner that part of his signature is upon the photograph and part the certificate.