Certified Anchor Installer Registration Form



fields are completed.	d in this form will remain confident	al to AEFAC. I	Please ensure that all required
Title			
Family Name			
Given Name(s)			
Date of birth			
Correspondence add	ress:		
Street address			
Suburb Postcode		State	
Contact number	F	ax Number [
Email address			
The following are que 1) How many ye 2) Type(s) of po a. Cher i b. Mec	estions related to your experience ears of experience do you have in post-installed anchors that you have mical anchors i. Injection system ii. Capsule system hanical anchors se list types of products that you have	as an installer: ost-installed a worked with (nnchors installation? please tick the relevant items)

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a. V b. F	f installati 'ertical do Iorizontal Overhead	-	ou have perfo	ormed be	fore (please tick the relevant items)
		_			arity to you (please tick the appropriate pefore under each brand (if applicable)
	Very familiar	Familiar	Somewhat familiar	Not familiar	List of products used before
Allthread Industries					
Ancon					
Hilti					
Hobson Engineering					
Powers Fasteners					
ITW Ramset					
Simpson					

Strong-Tie

Wurth