



ASSESSED SURVEYOR IN REMEDIAL TREATMENT APPLICATION FOR ASSESSMENT

Delegate Name: _____

Address: _____

Tel: _____ Fax: _____

Mobile: _____ Email: _____

Company Name *[if applicable]*: _____

Company Address: _____

Tel: _____ Fax: _____

Please invoice: Delegate Company

I have been surveying for _____ years/months and received my experience as a surveyor from:

Assessment is normally carried out during the day, in the candidate's home/company area. In which location would you like the assessment to take place?

If you have already passed one or two ASRT modules, please state which modules have been passed, listing dates and candidate number:

Delegate Number: _____ Health & Safety/Law Module *[date]*

Dampness Module *[date]* Timber Module *[date]*

Please find enclosed:

Payment of £950.00 (+ vat) [all 3 modules] & Six reports and enclosures

Cheques should be made payable to:

Property Care Association

A small reduction can be negotiated if one or more ASRT or CSRT modules have already been passed



Upon receipt of the completed application form and enclosures the Institute of Specialist Surveyors & Engineers (ISSE) will nominate an assessor, who will contact you to agree an assessment date and place, and answer any queries you may have on the assessment procedure.

If for any reason a candidate fails to attend or provide a survey address on the agreed assessment date without prior notice, the full fee will be forfeited. If a candidate withdraws giving 10 days notice, the full fee will be credited to a new assessment date. Any candidate withdrawing within 10 days [for any reason] will be charged a 25% maximum administration fee, subject to negotiation with the Institute.

Please note that the decision of the Institute of Specialist Surveyors & Engineers on a candidate assessment is final. The actual marks awarded will not be released to the candidate, although any candidate failing to achieve the required standard in any module will be advised in writing of the areas of concern.

Upon passing all three modules candidates will be entitled thereafter to use the letters designate ASRT after their name; a professional qualification in recognition of an achievement to be proud of.

Signed: _____ Date: _____

For Office Use Only

Payment Rec'd: _____ Date: _____ Delegate No: _____

Assessor: _____ Documents sent: _____