NATIONAL COMMISSION FOR THE CERTIFICATION OF CRANE OPERATORS (NCCCO)

WRITTEN EXAMINATION
TEST SITE COORDINATOR HANDBOOK

• MOBILE CRANE OPERATOR
• SERVICE TRUCK CRANE OPERATOR
• TOWER CRANE OPERATOR
• OVERHEAD CRANE OPERATOR
• ARTICULATING CRANE OPERATOR
• DIGGER DERRICK OPERATOR
• DEDICATED PILE DRIVER OPERATOR
• CRANE INSPECTOR
• LIFT DIRECTOR
BOARD OF DIRECTORS

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Leavitt Crane

VICE PRESIDENT
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National Commission for the Certification of Crane Operators

NCCCO does not discriminate against any individual because of race, gender, age, creed, disability, or national origin.
Dear Written Examination Test Site Coordinator:

Welcome to the Written Examination segment of the National Commission for the Certification of Crane Operators (NCCCO) national crane operator certification program. NCCCO is a nonprofit organization founded in 1995 to establish a fair and independent evaluation of crane operator knowledge and skills. Key to this industry-led effort has been the development of the CCO Written and Practical Examinations.

This nationally recognized program is the culmination of many years’ hard work by experts from the varied industries and groups that use cranes, including construction, steel erection, operating engineers, utilities, crane rental, petrochemicals, pulp and paper, etc. NCCCO task forces were staffed by experts from all aspects of the crane industry—crane operators, training directors, managers, supervisors, manufacturers—who together represent many thousands of hours of crane operating experience. These volunteers gave freely of their time and expertise with the goal of improving the safety of all whose work brings them into contact with cranes and lifting equipment.

Until recently crane operator certification has been voluntary unless required by local jurisdictions or specific employers. However, in August 2010, the federal Occupational Safety and Health Administration (OSHA) enacted new national standards for cranes and derricks used in construction under 29 CFR 1926 Subpart CC. These new rules require that operators of most cranes above 2,000 lb. capacity when used in construction need to be either certified by an accredited crane operator testing organization such as NCCCO or qualified through an audited employer program. Section 1926.1427 of the new rule describes crane operator certification/qualification requirements. Option 1, which is anticipated to be the most commonly used, requires operators to be certified by a nationally accredited crane operator testing organization that tests operators through written and practical testing. Obtaining CCO certification from NCCCO meets all the requirements set forth by the new OSHA rule.

To ensure that CCO examinations are—and remain—a valid measurement of a crane operator’s proficiency, NCCCO used its exam development expertise and guided its task forces in establishing key elements of the program, including identifying essential skills, selecting tasks, standardizing test conditions, developing the scoring process, establishing reliability among tests, and creating flexible application and scheduling procedures. NCCCO continually analyzes the performance of CCO exams and reports to NCCCO’s Exam Management Committees.

This handbook has been developed to provide you, the Written Examination Test Site Coordinator, with all the information you need to prepare for and administer successful CCO Written Examinations. As the Written Examination Test Site Coordinator, you play a critical role in the smooth administration of CCO exams on test day. It is vitally important that you study this entire handbook carefully before making any preparations for a written test administration. The validity and reliability of the test you are planning to administer depends on your following the requirements described in this handbook precisely. Failure to do so could result in your test being declared invalid and the need to start over.

NCCCO recognizes the commitment that you have made and the resources that you will allocate to hosting CCO Written Examinations. We want your experience to be a positive and successful one, and we stand ready to assist you in reaching that goal. If, after reading this handbook, there is anything you do not fully understand or need clarifying, please call NCCCO at 703-560-2391 or email info@nccco.org. NCCCO staff will guide you through any aspects of the Written Examination administration process that you would like explained in detail.
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Written Examination Process

FOUR OR MORE WEEKS BEFORE THE WRITTEN EXAM…

STEP 1
The Test Site Coordinator identifies:
• Date for written test administration
• Location for written test administration
• The approximate number of candidates to be tested
• CCO written exams being requested

STEP 2
The Test Site Coordinator completes and submits the following to NCCCO:
• Written Test Administration Request Form
• Test Site Coordinator Agreement—Written Exams

Once the request has been approved, NCCCO will email a letter of approval and confirmation to the Test Site Coordinator. The confirmation letter will include a test administration number and instructions on how to proceed.

TWO OR MORE WEEKS BEFORE THE WRITTEN EXAM…

STEP 3
The Test Site Coordinator prepares and submits all candidate application materials to NCCCO, including:
• Completed candidate applications
• Test Site Coordinator Summary Form
• Appropriate candidate fees

ONE WEEK BEFORE THE WRITTEN EXAM…

STEP 4
The Test Site Coordinator:
• Reviews the completed candidate roster as prepared by NCCCO
• Confirms the number of candidates, and requested examinations for accuracy
• Addresses any discrepancies with NCCCO

TWO OR MORE DAYS BEFORE THE WRITTEN EXAM…

STEP 5
The Test Site Coordinator contacts the Chief Examiner assigned by NCCCO to confirm test date, start time, and driving directions/location of exam.

ON THE DAY OF THE WRITTEN EXAM…

STEP 6
The Test Site Coordinator:
• Prepares a testing room in accordance with guidelines as published on the Ready Reference Checklist
• Meets the Chief Examiner and escorts him/her to the testing room
• Ensures that the Test Site Coordinator (or his/her local contact) is available to the Chief Examiner during the test
CRITERIA FOR TEST SITES

To be an approved NCCCO Test Site, facilities must meet all the criteria for hosting a Written Examination described herein. If the facility meets the stated criteria, NCCCO will provide all necessary information to allow tests to be scheduled.

The examination room should be set up prior to the Chief Examiner’s arrival. It must provide adequate separation of candidates, as well as sufficient space for taking the examination. In addition, administration sites must meet the following requirements:

- There must be only one point of entry and exit; candidates must enter and exit through the same door.
- The testing room must be an indoor facility suitable for the exam candidates, to include:
  - Quiet, well-lit, and properly ventilated, with a comfortable temperature and free from distractions to candidates.
  - Accessible to candidates with special needs.
  - A head table or podium at the front of the room.
  - A registration table.
  - Easy access to unlocked rest rooms stocked with sufficient supplies (no porta-potties).
  - Easy access to a water fountain.
  - Large signs prominently posted making candidates aware of the location of the test.
  - A clock visible to all candidates, preferably hanging on the wall at the front of the room so that candidates can see it without turning their heads.
- The examination room should be set up in classroom style. There must be sufficient tables and space for the number of candidates registered. Make certain that the number of candidates can be seated according to the following requirements:
  - **6-foot tables:** No more than two candidates per table.
  - **8-foot tables:** No more than three candidates per table.
  - **Round tables:** No more than one candidate per table; these may be used, but are often insufficient due to the requirement of only one candidate per table.
  - **Desks:** No more than one candidate per desk; desks may be used only if their surface area is large enough to hold both the test booklet and answer sheet, and they must accommodate both left-handed and right-handed candidates with equal comfort.
- The tables must have smooth writing surfaces and adequate space to accommodate examination booklets and answer sheets without crowding.
- There must be an adequate supply of sharpened #2 pencils for candidates to use on test day.
- The chairs must be comfortable, with an appropriate height in relation to the tables used. Chairs with backs are preferable to stools or benches without backs.
- Rest rooms must be located near the examination room(s) and must be easy to find. Post directional signs if necessary.
- Room acoustics must be good. If the room is large, make sure that a microphone is available and that it works well. Candidates in the back of the room must be able to hear verbal instructions clearly.
- There must be adequate space for Proctors to observe candidates easily.
- Parking must be sufficient to accommodate the number of vehicles expected.

ROLES AND RESPONSIBILITIES

Test Site Coordinator

The person designated by the host company or organization to liaise with NCCCO on test administration matters is known as the Test Site Coordinator (TSC).

The Test Site Coordinator is responsible for:

- Submitting all requested information to NCCCO in a timely fashion on the Written Test Administration Request Form and Test Site Coordinator Summary Form; Written Test Administration Requests may also be submitted online at: www.nccco.org/wtar.
- Preparing a testing room in accordance with the general directions listed above under Criteria for Test Sites.
- Liaising with the Chief Examiner and NCCCO in all aspects of Test Site preparation and administration.
- Ensuring candidate applications are complete and submitted in accordance with stated deadlines.
- Remaining on site throughout each test administration (or a designated representative).
• Signing the Test Site Coordinator Agreement Form
• Providing an email address and a cell phone number to NCCCO with the first paperwork submission (this may not be a shared email address)

NCCCO periodically emails Information Bulletins to all Test Site Coordinators containing clarifications and updated policies. To remain in good standing, Test Site Coordinators are required to abide by the information contained therein.

Chief Examiner
NCCCO has prepared strict rules and procedures for exam administration. Under these rules, the Chief Examiner is responsible for the administration and supervision of the examination site and staff, including the care and custody of examination materials. One Chief Examiner for each test room is required to administer the Written Exam.

The primary responsibilities of a Chief Examiner are:
• Ensuring that the security of the examination and related materials is not compromised
• Procuring adequate staff based upon registration count
• Training Proctors
• Ensuring that candidates have all of the proper materials and are following all directions for completing the forms and answer sheets accurately
• Ensuring that candidates neither give nor receive assistance in answering questions on the examination
• Securing all examination materials from time of arrival to final shipping
• Accounting for examination materials
• Supervising examination day procedures
• Conducting examinations
• Maintaining professional standards of testing practices
• Following up with necessary reports and shipping of examination materials

Proctor
Proctors assist the Chief Examiner in the administration of the exam. Proctors are under the direction of the Chief Examiner during the test administration. Proctors may not be candidates waiting to take the Written Exam.

The primary responsibilities of Proctors are:
• Assisting with set up of room before the examination
• Assisting with admittance and identification check of candidates
• Distributing examination materials
• Monitoring the examination room and observing candidate behavior
• Collecting examination materials and checking out candidates
• Assisting with maintaining examination security
• Adhering to examination time limits
• Assisting with general cleanup at the close of the examination

Chief Examiner and Proctor Eligibility
NCCCO requires all personnel who are authorized access to CCO examinations to sign an Affidavit of Non-Disclosure. Copies of these affidavits are kept on file. To avoid conflict of interest and possible breach of security, individuals who will take the examination(s) in the future may not serve as either Chief Examiner or Proctor in the administration of CCO examinations.

RECERTIFICATION
Operators, crane inspectors, and lift directors certified by NCCCO must recertify every five years by taking and passing a Written Recertification Examination.

Although Written Recertification Examinations have shorter time limits than Written Examinations for first-time candidates, they can be scheduled at regular test administrations.

Recertification candidates count towards a Test Site’s overall candidate total for the purpose of avoiding site fees (minimum 15 candidates); see Applying to Host an CCO Written Examination for details.

For more information about recertification, see the appropriate Candidate Handbook or contact NCCCO at 703-560-2391 or via email at info@nccco.org.

TESTING ACCOMMODATIONS
NCCCO provides reasonable accommodations in accordance with the Americans with Disabilities Act (ADA) for individuals with documented disabilities who demonstrate a need for accommodation. In accordance
with the Americans with Disabilities Act, NCCCO does not discriminate against individuals with disabilities in providing access to its examination program.

The Americans with Disabilities Act of 1990 and accompanying regulations define a person with a disability as someone with a physical or mental impairment that substantially limits one or more major life activities, such as walking, seeing, hearing, or learning.

The purpose of accommodations is to provide equal access to CCO examinations. Accommodations match up with the identified functional limitation so that the area of impairment is relieved with an auxiliary aid or an adjustment to the testing procedure. Functional limitation refers to the aspects of a disability that interfere with an individual’s ability to function; that is, what someone cannot do on a regular and continuing basis as a result of the disability.

The purpose of documentation is to validate that an applicant for test accommodations is covered under the ADA as a disabled individual. Comprehensive information by a qualified professional is necessary to allow NCCCO to understand the nature and extent of the applicant’s disability and the resulting functional impairment that limits access to its examinations. Documentation also allows NCCCO to provide appropriate accommodations for such a disability.

NCCCO will provide, without cost to the candidate, reasonable accommodations designed to facilitate equal access to its certifying examinations for those candidates whose documentation supports such a determination. In no case will accommodations be provided that would compromise the examination’s ability to test accurately the skills and knowledge it professes to measure. Similarly, no auxiliary aid or service will be provided that would fundamentally alter the examination.

NCCCO strictly adheres to a policy of confidentiality and does not disclose names of applicants with disabilities or information concerning the application or accompanying documentation. Examinations administered with accommodations are not identified to third-party score recipients and are scored no differently than examinations of other applicants.

Arrangements for persons with disabilities will be provided upon approval. All requests for accommodations must be submitted by the applicant. To apply for accommodations, please download the NCCCO Application for Test Accommodations and the NCCCO Guidelines for Documenting a Request for Test Accommodations from the NCCCO website. For further information, see the complete NCCCO Testing Accommodations Policy at: www.nccco.org/accommodations.

If you have any questions or need clarification, please contact NCCCO at (703) 560-2391.
Applying to Host CCO Written Examinations

All requests for paper/pencil test (PPT) administrations must be made on the Written Test Administration Request Form at least four weeks prior to the desired test date. Written Test Administration Requests can also be completed online at www.nccco.org/wtar.

Once the request has been approved, NCCCO will email a letter of approval and confirmation to the Test Site Coordinator. The confirmation letter will include instructions on how to proceed with the candidate applications and a test administration number that must be included on candidate applications for that Test Site and secured test date.

Candidates also have the option of taking their Written Exams at approximately 300 PSI computer-based testing (CBT) facilities around the country. See the appropriate candidate handbook(s) for CBT application procedures and fees.

TEST SCHEDULING OPTIONS

Regular Schedule
With a guarantee of at least 15 candidates, there is no additional fee for Test Sites that submit a Written Test Administration Request Form at least four weeks prior to the desired test date.

Later Test Site Applications
Test Sites may apply with less than four weeks’ notice subject to the following fees:

- Less than four weeks to three weeks prior to exam: $200
- Less than three weeks to two weeks prior to exam: $300

Test Sites with Fewer than 15 Candidates
Test Sites may test fewer than 15 candidates at one time, subject to the following fees:

- 11–14 candidates: $200 flat fee, plus candidate fees
- 1–10 candidates: $300 flat fee, plus candidate fees

APPLICATION DEADLINES
Tests can be administered at anytime so long as application deadlines are adhered to. Sample deadlines shown are for a test date of January 29.

Written Test Administration
Request Form due four weeks prior to test date.

Candidate Applications and Test Site Coordinator Summary Form due two weeks prior to test.

Test Day

January

<table>
<thead>
<tr>
<th>Sun</th>
<th>Mon</th>
<th>Tue</th>
<th>Wed</th>
<th>Thu</th>
<th>Fri</th>
<th>Sat</th>
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</table>

Expedited Test Administrations
Test Sites may request expedited candidate application processing and score reporting for an additional fee. Fees are based on the specific circumstances of the test administration requested. Contact NCCCO for more details.

SECURE TEST SITES
Test Sites with limited access and/or enhanced security protocols that might interfere with the ability of testing personnel to administer tests are required to indicate on their Written Test Administration Request form that they are secure sites. They must also complete the enclosed Security Requirements Report and provide any associated documentation (such as the site’s formal security policy), all of which should be submitted along with the Written Test Administration Request Form.

SITE CANCELLATION/RESCHEDULING FEES
Test Sites will be required to pay a cancellation fee of $400 if they cancel without giving 15 days’ prior notice in writing to NCCCO. Test Sites that cancel or reschedule between 16 and 30 days prior to the scheduled test date will be required to pay a fee of $100.

Deadlines
Please note that all deadlines are based on UPON RECEIPT deadlines to NCCCO. Candidates/Test Site Coordinators are solely responsible for making sure that complete and accurate applications reach NCCCO by the stated deadline.

CANDIDATE APPLICATION FEES
The appropriate fees must be enclosed with the candidates’ applications (see table on following page). Checks and money orders payable to NCCCO are preferred. Credit cards (VISA, MasterCard, or American Express) may also be used. Do not send cash. Please do not staple the check or money order to the application form, but do include payment in the envelope with all the other application materials. All returned checks that cannot be processed are subject to a $30 fee.
<table>
<thead>
<tr>
<th>EXAM DESCRIPTION</th>
<th>EXAM FEES</th>
<th>RETEST FEES</th>
<th>RECERTIFICATION FEES</th>
<th>RECERTIFICATION RETEST FEES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mobile Crane Operator Written Examinations:</strong></td>
<td></td>
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</tr>
<tr>
<td>Core Exam plus any one Specialty Exam</td>
<td>$165</td>
<td>$165</td>
<td>$150</td>
<td>$150</td>
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<tr>
<td>Core Exam plus any two Specialty Exams*</td>
<td>$175</td>
<td>$175</td>
<td>$155</td>
<td>$155</td>
</tr>
<tr>
<td>Core Exam plus any three Specialty Exams*</td>
<td>$185</td>
<td>$185</td>
<td>$160</td>
<td>$160</td>
</tr>
<tr>
<td>Core Exam plus any four Specialty Exams*</td>
<td>$195</td>
<td>$195</td>
<td>$165</td>
<td>$165</td>
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<tr>
<td>Core Exam only</td>
<td>—</td>
<td>—</td>
<td>$165</td>
<td>—</td>
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<tr>
<td>One Specialty Exam only (Core passed)</td>
<td>$65</td>
<td>$65</td>
<td>$50</td>
<td>$50</td>
</tr>
<tr>
<td>Two Specialty Exams only (Core passed)*</td>
<td>$75</td>
<td>$75</td>
<td>$55</td>
<td>$55</td>
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<tr>
<td>Three Specialty Exams only (Core passed)*</td>
<td>$85</td>
<td>$85</td>
<td>$60</td>
<td>$60</td>
</tr>
<tr>
<td>Four Specialty Exams only (Core passed)*</td>
<td>—</td>
<td>$95</td>
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<td>$65</td>
</tr>
<tr>
<td><strong>Service Truck Crane Operator Written Examination:</strong></td>
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</tr>
<tr>
<td>Written Exam—Service Truck Crane only</td>
<td>$165</td>
<td>$165</td>
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<tr>
<td><strong>Tower Crane Operator Written Examination:</strong></td>
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<tr>
<td>Written Exam—Tower Crane only</td>
<td>$165</td>
<td>$165</td>
<td>$150</td>
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</tr>
<tr>
<td>Written Exam—Current CCO–certified Mobile Crane Operator or new candidate registering for Mobile Crane Operator exams at the same time as Tower Crane exam*</td>
<td>$50</td>
<td>$50</td>
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<tr>
<td><strong>Overhead Crane Operator Written Examination:</strong></td>
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<tr>
<td>Written Exam—Overhead Crane only</td>
<td>$165</td>
<td>$165</td>
<td>$150</td>
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<tr>
<td>Written Exam—Current CCO–certified Mobile Crane Operator or new candidate registering for Mobile Crane Operator exams at the same time as Overhead Crane exam*</td>
<td>$50</td>
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<tr>
<td><strong>Articulating Crane Operator Written Examination (includes Articulating Boom Cranes and Articulating Boom Loaders):</strong></td>
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<tr>
<td>Written Exam—Articulating Crane only</td>
<td>$165</td>
<td>$165</td>
<td>$150</td>
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<tr>
<td>Written Exam—Current CCO–certified Mobile Crane Operator or new candidate registering for Mobile Crane Operator exams at the same time as Articulating Crane exam*</td>
<td>$50</td>
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<tr>
<td><strong>Digger Derrick Operator Written Examination:</strong></td>
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<tr>
<td>Written Exam—Digger Derrick Operator only</td>
<td>$165</td>
<td>$165</td>
<td>$150</td>
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</tr>
<tr>
<td>Written Exam—Current CCO–certified Mobile Crane Operator or new candidate registering for Mobile Crane Operator exams at the same time as Digger Derrick exam*</td>
<td>$50</td>
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<td><strong>Dedicated Pile Driver Written Examination:</strong></td>
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<tr>
<td>Written Exam—Dedicated Pile Driver Operator</td>
<td>$200</td>
<td>$200</td>
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<tr>
<td><strong>Crane Inspector Written Examinations:</strong></td>
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<tr>
<td>Core Inspector Exam</td>
<td>$250</td>
<td>$250</td>
<td>$225</td>
<td>$225</td>
</tr>
<tr>
<td>Mobile Crane Inspector Exam</td>
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<td>$250</td>
<td>$225</td>
<td>$225</td>
</tr>
<tr>
<td>Tower Crane Inspector Exams</td>
<td>$250</td>
<td>$250</td>
<td>$225</td>
<td>$225</td>
</tr>
<tr>
<td>Overhead Crane Inspector Comprehensive Exam</td>
<td>$350</td>
<td>$350</td>
<td>$315</td>
<td>$315</td>
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<tr>
<td><strong>Lift Director Written Examinations:</strong></td>
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<tr>
<td>Lift Director Core Exam</td>
<td>$150</td>
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<tr>
<td>Lift Director—Mobile Cranes Specialty Exam</td>
<td>$150</td>
<td>$150</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Lift Director—Tower Cranes Specialty Exam</td>
<td>$150</td>
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</table>

*To receive discounted pricing all written exams must be taken at the same test administration.*
All application materials must be received at NCCCO’s office according to the sample schedule outlined above.

Late Applications
Applications received after the application deadlines, but at least four business days prior to the exam administration date are subject to a $50 late fee. This fee must be included with the late application(s).

For example, for a test administration on a Saturday, late applications that arrive at NCCCO’s testing office by 5:00 p.m. (ET) on the Monday evening prior to the test can be accepted. Candidate applications that arrive after that time cannot be accepted.

Walk-in candidates cannot be accepted under any circumstances.

RETEST POLICY
If a candidate fails a Written Exam, he/she may retake it at a paper/pencil test site or a computer-based test site.

LENGTH OF TEST DAY
CCO written exams are carefully designed to provide a reliable and valid assessment of a candidate’s knowledge and skills. Time limits are carefully determined for each written exam to allow enough time for a prepared candidate to complete the exam and to provide for an efficient and successful administration of all exams to scheduled candidates on testing day.

To provide each candidate with a fair and standardized administration of the written examination(s), and to ensure the reliability and validity of the written examinations is maintained, it is not recommended that a candidate schedule written exams totaling more than six hours of testing time on the same day.

RESCHEDULING, CANCELLATIONS, AND WITHDRAWALS
Should a candidate be unable to sit for the examination, NCCCO must receive notification in writing no later than seven business days prior to the examination date. Candidate fees will be held up to one year. When the candidate reschedules, at that time he/she will need to pay an additional $25 rescheduling fee. Candidates who wish to reschedule their examinations MUST notify NCCCO and submit the necessary documentation and fees to NCCCO by the deadline for the rescheduled test date.

Candidates withdrawing or canceling after the deadline or not sitting for the examination will forfeit all application fees and will NOT receive a refund.

Emergency Cancellations or Withdrawals
ONLY the following situations will be accepted as grounds for emergency cancellations or withdrawals by a candidate:
- **Called to work**—supporting documentation required: letter from employer
- **Candidate illness**—supporting documentation required: doctor’s note
- **Family death**—supporting documentation required: death certificate or obituary notice

Requests for medical and personal emergency withdrawals are handled by NCCCO’s Testing Services Department. Candidates must write a letter to NCCCO describing their situation, including their full name, address, and Candidate ID/CCO Certification number, along with the scheduled test date, site number, and supporting documentation indicated above.

**NCCCO MUST receive this written notification within seven business days after the scheduled examination date or the candidate will forfeit all application fees.**

Candidates will be allowed to reschedule for a future examination administration up to one year from the emergency cancellation or withdrawal.

Candidates will NOT receive a refund if they decide they no longer wish to take the test.

SCORE REPORTS
All candidates receive a report of their performance from NCCCO within approximately 12 business days after the examination administration. Written exam score reports include a strength and weakness report by content domain.

Test Site Coordinators are automatically sent at no charge a Pass/Fail Score Report for all candidates testing at their sites.

---

**Additional fees:**

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Updated/replacement Certification Card (for current CCO card holders only)</td>
<td>$25</td>
</tr>
<tr>
<td>Duplicate Score Reports</td>
<td>$25</td>
</tr>
<tr>
<td>Rescheduling Fee (must notify at least seven days in advance)</td>
<td>$25</td>
</tr>
<tr>
<td>Returned Check Fee</td>
<td>$30</td>
</tr>
<tr>
<td>Incomplete Application Fee (includes incomplete payment, invalid credit card, and/or changes to scheduled exams)</td>
<td>$30</td>
</tr>
<tr>
<td>Candidate Application Late Fee (see Late Applications)</td>
<td>$50</td>
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</tbody>
</table>
Test Site Coordinators may also request a Detailed Score Report for all candidates by completing the appropriate form in this handbook and submitting it, along with a $50 processing fee, to NCCCO when returning test administration materials for each administration. **Note that all requests for Detailed Score Reports must include the release signature of each candidate.**

Report requests are processed upon receipt at NCCCO and provided to Test Site Coordinators after the exams are scored (normally within 10 business days of the exam).

**PRACTICAL EXAMINATION**

Operator candidates must pass both a Written Exam and a Practical Exam for the designation(s) they wish to be certified in. Candidates have 12 months after they pass their first Exam (Written or Practical) in which to take the corresponding Written or Practical Exam. Candidates may take their Written and Practical Exams in any order. For example, a candidate passing the Written Exams (Core + Specialty) for the Telescopic Boom Cranes—Swing Cab (TLL) designation in January 2011 has until the end of January 2012 to pass the Telescopic Boom Cranes—Swing Cab (TLL) Practical Exam. Crane Inspector candidates do not take a practical exam, so this policy applies to all Crane Inspector written exams.

Any tests passed within a 12-month period count towards certification. For example, a candidate who passes the Written Core Exam in January 2011 and the Practical Exam in June 2011 but does not pass the corresponding Written Specialty Exam until February 2012 will then be required to retake (and pass) the Written Core Exam. The Practical Exam would count toward certification until the end of June 2012.

Candidates for certification or recertification may petition for an extension of NCCCO’s standard timeline(s). NCCCO staff shall have the discretion to make the initial determination of whether a requested extension should be granted. Petitions for an extension of time are generally denied absent a showing of extraordinary circumstances. Denials of such petitions may be appealed to the Appeals Committee.
# Typical Test Day Schedule

<table>
<thead>
<tr>
<th>TIME</th>
<th>ACTIVITY</th>
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</table>
| 7:30 a.m.–8:00 a.m. | Chief Examiner and Proctors arrive at Test Site  
Check and prepare testing room                                                                 |
| 8:00 a.m.–8:15 a.m. | Candidates sign in  
Check candidate IDs  
Seat candidates                                                                                       |
| 8:15 a.m.–8:30 a.m. | Chief Examiner reads instructions to candidates*                                                                                      |
| 8:30 a.m.–10:00 a.m. | **Mobile Core, Tower Crane Operator, Overhead Crane Operator, Articulating Crane Operator, Digger Derrick Operator, Service Truck Crane Operator, Rigger, Crane Inspector Core, Overhead Crane Inspector Comprehensive Exam, or Lift Director Core Exam** |
| 10:00 a.m.–10:15 a.m. | Break (Collect and count all materials)                                                                                               |
| 10:15 a.m.–10:30 a.m. | Candidates arrive and are admitted for the Mobile Specialty, Tower Crane Operator, Overhead Crane Operator, and/or Rigger Exams  
Chief Examiner reads instructions to candidates*  
Distribute examination booklets and answer sheets                                                   |
| 10:30 a.m.–11:30 a.m. | **First Mobile Specialty, Tower Crane Operator, Overhead Crane Operator, Rigger, Crane Inspector Specialty Exam, or Lift Director Specialty Exam** |
| 11:30 a.m.–11:40 a.m. | Collect and count all materials  
Distribute examination booklets and answer sheets                                                   |
| 11:40 a.m.–12:40 p.m. | **Second Mobile Specialty, Tower Crane Operator, Overhead Crane Operator, or Rigger Exam**                                              |
| 12:40 p.m.–1:10 p.m. | Lunch Break                                                                                                                              |
| 1:10 p.m.–1:20 p.m. | Chief Examiner reads instructions to candidates*  
Distribute examination booklets and answer sheets                                                   |
| 1:20 p.m.–2:20 p.m. | **Third Mobile Specialty, Tower Crane Operator, Overhead Crane Operator, or Rigger Exam**                                               |
| 2:20 p.m.–2:30 p.m. | Collect and count all materials  
Distribute examination booklets and answer sheets                                                   |
| 2:30 p.m.–3:30 p.m. | **Fourth Mobile Specialty, Tower Crane Operator, Overhead Crane Operator, or Rigger Exam**                                             |
| 3:30 p.m.–3:40 p.m. | Collect and count all materials  
Distribute examination booklets and answer sheets                                                   |
| 3:40 p.m.–4:40 p.m. | **Tower Crane Operator, Overhead Crane Operator, or Rigger Exam**                                                                       |
| 4:40 p.m.          | Collect and count materials  
Dismiss candidates                                                                                                                         |

For logistical reasons, and in fairness to each candidate, it is not recommended that a candidate schedule written exams totaling more than six hours of testing time on the same day.

*Since some candidates may take only a Mobile Specialty exam and not the Mobile Core, Tower Crane Operator, Overhead Crane Operator, Articulating Crane Operator, or Rigger exams, the Chief Examiner is required to read the instructions at the start of the Mobile Core exam, at the start of the first Mobile Specialty exam, before the start of the third Mobile Specialty exam (if lunch is scheduled), and before the start of the final Tower Crane Operator, Overhead Crane Operator, or Rigger exam. For details on administering Rigger Exams, see the Rigger Test Site Coordinator Handbook.*
Test Administration Forms
ALL PROGRAMS

Please photocopy all sides of the following forms for your use in applying for CCO Written Examinations:

- Written Test Administration Request Form
- Test Site Coordinator Agreement Form
- Ready Reference Checklist—Written Test Site
- Test Site Coordinator Summary Form
- Detailed Score Report Request Form
- Security Requirements Report
Written Test Administration
REQUEST FORM

This form may also be completed and submitted online at: www.nccco.org/wtar.

Please submit this form when you have found a facility that meets the test criteria and you are ready to commit to a specific exam date. This form must be submitted at least four weeks prior to the test date selected below. Incomplete forms or forms with no signature may delay processing. You will receive an approval letter with a test administration number to document on your Candidate Applications, which are due no later than two weeks prior to the Written Exam test date.

Test Site can seat up to _________ candidates. There are _________ (number) testing rooms at this Test Site.

Do you want your written Test Site open to candidates outside your company or organization? Yes ☐ No ☐

Test Site Coordinator: Please indicate the best time of the day for the Chief Examiner to contact you: _________ a.m./p.m.

Please type or print neatly.

<table>
<thead>
<tr>
<th>TEST SITE COORDINATOR NAME</th>
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</tr>
</thead>
<tbody>
<tr>
<td>TEST SITE COORDINATOR COMPANY or ORGANIZATION</td>
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<tr>
<td>TEST SITE COORDINATOR COMPANY MAILING ADDRESS</td>
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<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
<tr>
<td>TEST SITE COORDINATOR CELL PHONE</td>
<td>COMPANY PHONE</td>
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<tr>
<td>TEST SITE COORDINATOR EMAIL</td>
<td></td>
</tr>
<tr>
<td>REQUESTED DATE OF TEST</td>
<td></td>
</tr>
<tr>
<td>TEST SITE LOCATION NAME (if different from above)</td>
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</tr>
<tr>
<td>DESIGNATED REPRESENTATIVE AT TEST SITE LOCATION (if different from Coordinator above)</td>
<td>REPRESENTATIVE CELL PHONE</td>
</tr>
<tr>
<td>TEST SITE ADDRESS (if different from above)</td>
<td>REPRESENTATIVE EMAIL</td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
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</tbody>
</table>

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<tr>
<th>WRITTEN EXAMS SUMMARY</th>
<th>Mobile Cranes</th>
<th>Tower Cranes</th>
<th>Overhead Cranes</th>
<th>Articulating Cranes</th>
<th>Digger Derricks</th>
<th>Ded. Pile Driver</th>
<th>Rigger Level I</th>
<th>Rigger Level II</th>
<th>Signal-person</th>
<th>Crane Inspector</th>
<th>Lift Director</th>
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<tr>
<td># of Certification Exams:</td>
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<tr>
<td># of Handbooks Needed:</td>
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</table>

I have read and understand the expectations of the Test Site Coordinator as well as the Criteria for the Test Site as described in the Written Examination Test Site Coordinator Handbook available on the NCCCO website at www.nccco.org/handbooks.

Please return this Application Form for approval at least four weeks prior to exam to:

NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, FL 34698
Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org

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Test Site Coordinator Agreement
FOR CCO WRITTEN EXAMINATIONS

Thank you for your application to be a Test Site Coordinator for CCO Written Examinations. Test Site Coordinators play a critical role in the CCO examination process, from the initial site application, through the collection and submission of candidate applications to NCSCCO, to serving as liaison with the Examiner on test day. To ensure a smooth administration of CCO certification exams, it is critical that Test Site Coordinators fulfill their duties in a competent and professional manner. Please review the following Agreement and sign below where indicated, acknowledging that you have read and understood this Agreement and that, should your application be successful, you agree to abide by all of its provisions. NOTE: If your employment or affiliation changes from the company/organization listed below, you must complete and execute this form anew.

As a Test Site Coordinator for CCO Written Examinations, I certify and acknowledge that:

1. I will not disclose (nor cause to be disclosed) to anyone outside of NCSCCO any confidential information I obtain as a result of my participation as a Test Site Coordinator in the CCO certification program, including, without limitation, the content of any examination.
2. I have read all applicable NCSCCO policies and procedures, particularly those detailed in the Written Examination Test Site Coordinator Handbook, and I agree to be bound by the same.
3. I have read NCSCCO’s Criteria for Test Sites and agree to prepare all Test Sites in accordance with the general directions set forth therein.
4. I agree to provide authorized personnel with access to the Test Site on test day and to remain (or arrange for my designated representative(s) to remain) at the Test Site throughout the test administration.
5. If I arrange for one or more representatives to remain at the Test Site, I agree to explain the responsibilities and obligations of a Test Site Coordinator to such persons and to ensure their compliance therewith.
6. I understand that the site for which I am a Test Site Coordinator may be audited by NCSCCO and that I am required to cooperate fully with the NCSCCO Auditor.
7. I agree to meet all applicable deadlines for submitting the Written Examination Test Administration Request Forms and Test Site Coordinator Summary Forms.
8. I agree to ensure that all Candidate Applications I submit are complete and in compliance with stated NCSCCO policies and procedures, including any required payments.
9. I agree to pay any and all fees that are due in a timely fashion, including any additional fees I may incur by submitting incomplete or late applications.
10. I agree not to make, and not to knowingly allow any other person to make, any material misrepresentation or omission of fact in any document I submit to NCSCCO.
11. I am acting on my own behalf and/or on behalf of the company or organization set forth below, and I am not acting to circumvent a prior NCSCCO suspension or revocation.
12. I agree to conduct my affairs with NCSCCO, any Examiner, clients, and candidates in a professional manner, according to accepted codes of business conduct.

I understand that non-compliance with any of these provisions may result in the revocation or suspension of my status as a Test Site Coordinator for CCO Written Examinations. I agree that any questions or other matter arising under this agreement will be governed by and construed in accordance with the laws of the State of Virginia, without regard to choice of law rules. All actions and proceedings arising out of or relating directly or indirectly to this agreement will be filed and litigated exclusively in any state court or federal court located in the State of Virginia. I expressly consent to the jurisdiction of these courts.

SIGNED ___________________________ DATE ____________

NAME ______________________________ EMAIL __________________________

COMPANY/ORGANIZATION ______________________________

ADDRESS __________________________________________

CITY ____________ STATE ____________ ZIP ____________ COUNTRY ______

TELEPHONE ____________ CELL ____________

Please complete and submit to:

NCSCCO—Testing Services Department
1960 Bayshore Blvd., Dunedin, FL 34698
Phone: 727-449-8525 / Fax: 727-461-2746 / Email: kqualls@ncco.org
TEST ADMINISTRATION APPLICATION PROCEDURE

1. Complete the Written Test Administration Request Form in this handbook (or use online form at www.nccco.org/wtar) and submit it to NCCCO at least four weeks prior to the requested test date.

2. Once your site is approved, NCCCO will send you a Test Site approval letter with a test administration number for this secured date and site location.

3. Two weeks before submitting Crane Inspector Candidate Applications, make sure that all Crane Inspector candidates’ Experience Forms have been submitted. Crane Inspector Candidate Applications will not be accepted without Experience Forms being completed and reviewed.

4. Two weeks before the test date use the Test Site Coordinator Summary Form to provide the total number of each type of candidate applications submitted to NCCCO. Use the Test Administration Procedure checklist below to be sure you have completed all required steps.

TEST ADMINISTRATION PROCEDURE CHECKLIST

- Enclose Candidate Applications including the payment information page if candidate is paying for the test. Verify that all applications are completed properly and signed.
- Enclose Test Site Coordinator Summary Form completed with all information requested. Verify that the Test Site location information is completed and all candidate information entered.
- Enclose payment for group by company/organization; verify that a check or money order is enclosed or credit card information is properly completed and signed and the total amount entered.

TEST ROOM CHECKLIST

- Quiet, well-lit, properly ventilated surroundings with a comfortable temperature and free from distraction
- Accessible to candidates with special needs
- Head table or podium at the front of the room
- Registration table
- Easy access to unlocked rest rooms stocked with sufficient supplies
- Easy access to water fountain
- Large signs prominently posted making candidates aware of the location of the test
- A clock visible to all candidates, preferable at the front of the room
- Sufficient tables with smooth writing surface and enough space for the number of candidates registered
- Comfortable chairs (with backs) with an appropriate height in relation to the tables
- Room has good acoustics to allow candidates to hear instructions clearly
- Adequate space for Proctors to observe candidates easily
- Parking sufficient to accommodate the number of vehicles expected
# Test Site Coordinator SUMMARY FORM

### Please type or print neatly.

<table>
<thead>
<tr>
<th>TEST SITE COORDINATOR</th>
<th>COMPANY or ORGANIZATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMPANY MAILING ADDRESS</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
<tr>
<td>TEST SITE COORDINATOR CELL PHONE</td>
<td>COMPANY PHONE</td>
</tr>
<tr>
<td>EMAIL (Test Site Coordinator/Company Representative)</td>
<td></td>
</tr>
<tr>
<td>TEST DATE</td>
<td>TEST ADMINISTRATION NUMBER</td>
</tr>
<tr>
<td>COMPANY / ORGANIZATION AT TEST SITE LOCATION (if different from above)</td>
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<tr>
<td>COMPANY REPRESENTATIVE AT TEST SITE LOCATION (if different from Coordinator above)</td>
<td>COMPANY REPRESENTATIVE CELL PHONE</td>
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<td>TEST SITE ADDRESS (if different from above)</td>
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<td>CITY</td>
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</tbody>
</table>

### Number of Candidates: [ ]

| Candidate Fees: | $___________ |
| Candidate Late Fees: | $___________ |
| Test Site Late Fees: | $___________ |
| Special Administration Fees: | $___________ |
| Total Amount of Fees Enclosed: | $___________ |

### METHOD OF PAYMENT (Do not send cash.)

- [ ] Personal check enclosed
- [ ] Employer check enclosed
- [ ] Money order enclosed

**Please do not staple your check or money order.**

Checks and money orders should be payable to: NCCCO

If paying by credit card, please complete the following information:

- [ ] CREDIT CARD NUMBER [ ]
- [ ] EXPIRATION DATE [ ]
- [ ] NAME (Print as it appears on card) [ ]
- [ ] SIGNATURE (on card) [ ]
- [ ] SECURITY CODE* [ ]

* Three- or four-digit code located on the card.

Please return this Test Site Coordinator Summary Form along with all Candidate Application Forms to:

NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, FL 34698

Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org

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Detailed Score Report Request Form
FOR CCO WRITTEN EXAMINATIONS

If you wish to receive a Detailed Score Report on candidates taking the CCO examination(s), please fill out this form and submit it, along with a $50 processing fee, to NCCCO when you return your test administration materials for each administration:

NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, FL 34698

Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org

You must submit this form for each test administration. Scores are the property of the candidate, and his/her consent must be obtained before NCCCO can release the scores to a third party. Please have the candidate sign under the release statement below.

Please type or print neatly.

NAME OF REQUESTOR

COMPANY NAME

MAILING ADDRESS

CITY

STATE

ZIP

COUNTRY

TEST ADMINISTRATION NUMBER

TEST DATE

SIGNATURE

CANDIDATE RELEASE STATEMENT

Notice to Candidate: By signing this form, you are giving your permission to the National Commission for the Certification of Crane Operators (NCCCO) to release the details of your test scores directly to the person listed above as the "Requestor."

CANDIDATE NAME (printed) | DATE OF BIRTH* | CANDIDATE RELEASE SIGNATURE
--- | --- | ---
1. | | 
2. | | 
3. | | 
4. | | 
5. | | 
6. | | 
7. | | *Date of birth required to assure correct candidate identification.

METHOD OF PAYMENT FOR DETAILED SCORE REPORT REQUEST

Do not send cash.

☑ Personal check enclosed
☑ Employer check enclosed
☑ Money order enclosed

Checks and money orders should be payable to: NCCCO

If paying by credit card, please complete the following information:

CREDIT CARD NUMBER

EXPIRATION DATE

SECURITY CODE*

NAME (Print as it appears on card)

SIGNATURE (on card)

* Three- or four-digit code located on the card.
# DETAILED SCORE REPORT REQUEST FORM (CONT’D)

<table>
<thead>
<tr>
<th>TEST ADMINISTRATION NUMBER</th>
<th>TEST DATE</th>
<th>NAME OF REQUESTOR</th>
</tr>
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## CANDIDATE RELEASE STATEMENT

*Notice to Candidate:* By signing this form, you are giving your permission to the National Commission for the Certification of Crane Operators (NCCCO) to release the details of your test scores directly to the person listed above as the “Requestor.”

<table>
<thead>
<tr>
<th>CANDIDATE NAME (printed)</th>
<th>DATE OF BIRTH*</th>
<th>CANDIDATE RELEASE SIGNATURE</th>
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<td>32.</td>
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</table>

*Date of birth required to assure correct candidate identification.
Security Requirements Report
WRITTEN EXAMINATIONS

A secured test site is a site that requires additional security clearance or security procedures for off-site personnel. If the Test Site Application indicates that the test site is a secure facility, please complete this form and submit it with the Written Test Administration Request Form.

Please type or print neatly.

<table>
<thead>
<tr>
<th>SECURITY CONTACT REPRESENTATIVE</th>
<th>WRITTEN TEST ADMINISTRATION NUMBER (IF KNOWN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOST COMPANY NAME</td>
<td></td>
</tr>
<tr>
<td>HOST COMPANY MAILING ADDRESS</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
<tr>
<td>SECURITY CONTACT PHONE</td>
<td>SECURITY CONTACT EMAIL</td>
</tr>
<tr>
<td>TEST SITE ADDRESS (Physical address of where the written test administration will be set up; P.O. Boxes not acceptable)</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
</table>

1. Does the site have a secured entrance?  ☐ Yes  ☐ No

2. If the site has multiple entrances, which entrance should testing personnel and/or NCCCO staff use to access testing location?

________________________________________________________________________
________________________________________________________________________

3. What type(s) of credentials or proof of training are required to gain access to the site?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4. How much time is required for a security review?

________________________________________________________________________

5. Can security reviews be performed in advance of testing personnel and/or NCCCO staff arriving at secure site?  ☐ Yes  ☐ No

6. Does the site have other site-specific requirements or protocols? (Describe below or attach written security policy.)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

SECURITY CONTACT SIGNATURE  DATE

Please complete and submit to:
NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, FL 34698
Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org

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Candidate Forms
ALL PROGRAMS

Please photocopy all sides of the following forms for your use in applying for CCO certification exams:

- Candidate Application—Written Examination: Mobile, Tower, & Overhead Crane Operator
- Candidate Application—Written Examination: Service Truck Crane Operator
- Candidate Application—Written Examination: Articulating Crane Operator
- Candidate Application—Written Examination: Digger Derrick Operator
- Candidate Application—Written Examination: Dedicated Pile Driver Operator
- Recertification Application—Written Examination: Mobile, Tower, & Overhead Crane Operator
- Recertification Application—Written Examination: Service Truck Crane Operator
- Recertification Application—Written Examination: Articulating Crane Operator
- Candidate Application—Written Examination: Crane Inspector
- Recertification Application—Written Examination: Crane Inspector
- Candidate Application—Written Examination: Lift Director
- Change of Address Form
Candidate Application
WRITTEN EXAMINATION—MOBILE, TOWER & OVERHEAD CRANE OPERATOR (PAPER/PENCIL TESTS ONLY)

Please type or print neatly.

FULL LEGAL NAME | First | Middle | Last | Suffix (Jr., Sr., III)
(as shown on driver’s license)

CCO CERTIFICATION NUMBER (if previously certified) | DATE OF BIRTH | CANDIDATE ID: (if previously tested)

MAILING ADDRESS | CITY | STATE | ZIP | COUNTRY

PHONE | CELL | EMAIL

COMPANY/ORGANIZATION

COMPANY MAILING ADDRESS | CITY | STATE | ZIP | COUNTRY

☐ I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).
(For details on NCCCO’s Testing Accommodations policy, please see http://www.nccco.org/accommodations)

WRITTEN EXAMINATION(S) FOR WHICH YOU ARE APPLYING
FILL IN the circle next to the crane type(s) for which you are applying; for Mobile Cranes, CHECK ☐ the load chart you want to use for that crane type. Also FILL IN the appropriate circle(s) below for correct fees. NOTE: If you are registering for Mobile Crane exams, you must register for the Mobile Core Exam and at least one Specialty Exam (unless you are a Retest Candidate).

If you are recertifying, please use separate Recertification Written Examination Application Form.

| LOAD CHARTS | Mobile Core Exam 652603 (Check one for each Specialty Exam) |
| Lattice Boom Crawler 652620 □ Terex/American |
| □ Manitowoc |
| Lattice Boom Truck (LBT) 652609 □ Link-Belt |
| □ Manitowoc |
| Telescopic Boom—Swing Cab (TLL) 652612 □ Grove (Truck Mount) |
| □ Link-Belt (Rough Terrain) |
| □ National (Boom Truck) |
| Telescopic Boom—Fixed Cab (TSS) 652616 □ Manitex (Boom Truck) |
| □ Shuttlelift (Carry Deck) |
| Boom Truck—Fixed Cab (BTF) 652671 □ Manitex (Boom Truck) |
| Tower Crane 654601 |
| Overhead Crane 653601 |

| WRITTEN EXAM/RETEST FEES |
| MOBILE CRANE EXAMS |
| □ Core Exam plus one Specialty Exam ...................... $165 |
| □ Core Exam plus two Specialty Exams .................... $175 |
| □ Core Exam plus three Specialty Exams .................. $185 |
| □ Core Exam plus four Specialty Exams ................... $195 |

| RETEST or ADDED SPECIALTY FEES |
| □ Core Exam only or Core plus one Specialty (Retest) .... $165 |
| □ One Specialty Exam (Retest or Added Specialty) .......... $65 |
| □ Two Specialty Exams (Retest or Added Specialty) ....... $75 |
| □ Three Specialty Exams (Retest or Added Specialty) ..... $85 |
| □ Four Specialty Exams (Retest) ............................ $95 |

| TOWER CRANE EXAMS |
| Tower Crane Written Exam (new Candidate) ............... $165 |
| □ Tower Crane Written Exam (current CCO-certified Mobile Crane Operator, or new candidate taking exam same time as Mobile Crane exams) ............... $50 |

| OVERHEAD CRANE EXAMS |
| □ Overhead Crane Written Exam (new Candidate) .......... $165 |
| □ Overhead Crane Written Exam (current CCO-certified Mobile Crane Operator, or new candidate taking exam same time as Mobile Crane exams) ............... $50 |

| OTHER FEES |
| □ Candidate Late Fee (if applicable) ........................ $50 |
| □ Incomplete Application Fee (if applicable) ............ $30 |
| □ Updated/Replacement Card ................................ $25 |

ADD TO TOTAL AMOUNT AT RIGHT

TOTAL AMOUNT DUE ................ $
CANDIDATE APPLICATION (CONT’D)
WRITTEN EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION

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<th>TEST SITE COORDINATOR</th>
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<tr>
<td>TEST ADMINISTRATION NUMBER</td>
<td>DATE YOU INTEND TO TAKE THE CCO EXAMINATION</td>
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I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO’s policies and procedures, including the Code of Ethics, shall constitute grounds for the rejection of my application, or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I expressly consent to NCCCO’s release of any information consistent with NCCCO’s Information Release policy. I have received a copy of the NCCCO Candidate Handbook, have read it, and agree to be bound by it. I agree to be bound by all NCCCO policies and procedures, as they may be amended from time to time, including without limitation those posted at nccco.org. I attest that I have passed a substance abuse test conducted by a recognized laboratory service and agree to comply with NCCCO’s substance abuse policy. I have passed a physical exam that complies with the ASME B30 standard for my certification designation and I will continue to comply with those requirements. I understand that if at any point during my certification period I fail to meet any of the requirements outlined above, or if matters arise that can affect my capability to continue to fulfill certification requirements, I must report it to NCCCO immediately and agree to cooperate with any subsequent investigation regarding such matters.

CANDIDATE SIGNATURE

METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

If paying by credit card, complete the following information:

<table>
<thead>
<tr>
<th>CREDIT CARD NUMBER</th>
<th>EXPIRATION DATE</th>
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<tr>
<td>NAME (Print as it appears on card)</td>
<td>SIGNATURE (on card)</td>
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</table>

Security Code* * Three- or four-digit code located on the card.

Checks and money orders should be payable to: NCCCO

Please send application and payments to:

NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, Florida 34698

Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org

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Candidate Application
WRITTEN EXAMINATION—SERVICE TRUCK CRANE OPERATOR (PAPER/PENCIL TEST ONLY)

Please type or print neatly.

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<th>FULL LEGAL NAME</th>
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<th>Suffix (Jr., Sr., III)</th>
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<td>DATE OF BIRTH</td>
<td>CANDIDATE ID: (if previously tested)</td>
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☐ I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).
(For details on NCCCO’s Testing Accommodations policy, please see http://www.nccco.org/accommodations)

WRITTEN EXAMINATION FOR WHICH YOU ARE APPLYING

FILL IN the appropriate circle(s) below for correct fees.

WRITTEN EXAM/RETEST FEES

- ☐ Service Truck Crane Operator Written Exam—new candidate (655101) ................................................................. $165
- ☐ Other Fees
  - ☐ Candidate Late Fee (if applicable) ......................................................................................................................... $50
  - ☐ Incomplete Application Fee (if applicable) ................................................................................................................. $30
  - ☐ Updated/Replacement Card ......................................................................................................................................... $25

TOTAL AMOUNT DUE ........................................................................................................ $
CANDIDATE APPLICATION (CONT’D)
WRITTEN EXAMINATION—SERVICE TRUCK CRANE OPERATOR

TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION

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I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO’s policies and procedures, including the Code of Ethics, shall constitute grounds for the rejection of my application, or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I expressly consent to NCCCO’s release of any information consistent with NCCCO’s Information Release policy. I have received a copy of the NCCCO Candidate Handbook, have read it, and agree to be bound by it. I agree to be bound by all NCCCO policies and procedures, as they may be amended from time to time, including without limitation those posted at nccco.org. I attest that I have passed a substance abuse test conducted by a recognized laboratory service and agree to comply with NCCCO’s substance abuse policy. I have passed a physical exam that complies with the ASME B30 standard for my certification designation and I will continue to comply with those requirements. I understand that if at any point during my certification period I fail to meet any of the requirements outlined above, or if matters arise that can affect my capability to continue to fulfill certification requirements, I must report it to NCCCO immediately and agree to cooperate with any subsequent investigation regarding such matters.

CANDIDATE SIGNATURE 

DATE

METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

Do not send cash.

If paying by credit card, complete the following information:

☐ VISA ☐ MasterCard ☐ American Express ☐ Personal check enclosed ☐ Employer check enclosed ☐ Money Order enclosed Please do not staple your check or money order.

CREDIT CARD NUMBER

EXPIRATION DATE

NAME (Print as it appears on card)

SIGNATURE (on card)

SECURITY CODE*  
* Three- or four-digit code located on the card.

Checks and money orders should be payable to: NCCCO

Please send application and payments to:

NCCCO—Testing Services Department  
1960 Bayshore Blvd.  
Dunedin, Florida 34698  
Phone: 727-449-8525  
Fax: 727-461-2746  
Email: kqualls@nccco.org
# Candidate Application

## WRITTEN EXAMINATION—ARTICULATING CRANE OPERATOR (PAPER/PENCIL TEST ONLY)

Please type or print neatly.

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**I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).**

(For details on NCCCO’s Testing Accommodations policy, please see [http://www.nccco.org/accommodations](http://www.nccco.org/accommodations))

### WRITTEN EXAMINATION FOR WHICH YOU ARE APPLYING

**FILL IN** the circle next to the Written Examination for which you are applying (only one) and indicate the appropriate fee(s). **Total the amount due at bottom.**

**WRITTEN EXAMS**

Please refer to the Written Exam Content Outlines for the contents of each exam.

- Articulating Boom Crane (ABC) 652902
- Articulating Boom Crane w/Winch (ABW) 652903
- Articulating Boom Loader (ABL) 652901

**WRITTEN EXAM/RETEST FEES**

- Written Exam—new candidate ....................... $165
- Written Exam—Current CCO—certified Mobile Crane Operator ........................................... $50
- Written Exam—new candidate registering for Mobile Crane Operator exams at same time as Articulating Crane Operator exam .......... $50

**OTHER FEES**

- Candidate Late Fee (if applicable) ..................... $50
- Incomplete Application Fee (if applicable) ........... $30
- Updated CCO certification card (ONLY for candidates adding to existing Mobile certifications) .. $25

**TOTAL AMOUNT DUE ................................ $**

---

Please note: This document is a sample from NCCCO and is not intended for use as an actual application. For detailed information, please refer to the official NCCCO website at [www.nccco.org](http://www.nccco.org).
CANDIDATE APPLICATION (CONT’D)
WRITTEN EXAMINATION—ARTICULATING CRANE OPERATOR

TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION

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CANDIDATE SIGNATURE

DATE

METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

Do not send cash.

If paying by credit card, complete the following information:

- CREDIT CARD NUMBER
- EXPIRATION DATE
- NAME (Print as it appears on card)
- SIGNATURE (on card)
- SECURITY CODE*  
  * Three- or four-digit code located on the card.

Checks and money orders should be payable to: NCCCO

Please send application and payments to:

NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, Florida 34698
Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org
**Candidate Application**

**WRITTEN EXAMINATION—DIGGER DERRICK OPERATOR**  
(PAPER/PENCIL TEST ONLY)

Please type or print neatly.

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☐ I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).  
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**WRITTEN EXAMINATION FOR WHICH YOU ARE APPLYING**  

**FILL IN** the appropriate circle(s) below for correct fees.

**WRITTEN EXAM/RETEST FEES**

- ☐ Digger Derrick Operator Written Exam—new candidate (650401) ......................................................... $165
- ☐ Digger Derrick Operator Written Exam—current CCO-certified Mobile Crane Operator (650401) ....................... $50
- ☐ Digger Derrick Operator Written Exam—new candidate registering for Mobile Crane Operator exams at the same time as Digger Derrick Operator exams (650401) ............................................................... $50

**OTHER FEES**

- ☐ Candidate Late Fee (if applicable) .................................................................................. $50
- ☐ Incomplete Application Fee (if applicable) ........................................................................ $30
- ☐ Updated/Replacement Card ............................................................................................. $25

**TOTAL AMOUNT DUE** .......................................................... $
CANDIDATE APPLICATION (CONT’D)
WRITTEN EXAMINATION—DIGGER DERRICK OPERATOR

TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION

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METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

| VISA | MasterCard | Personal check enclosed | Employer check enclosed | Money Order enclosed |

Do not send cash.

If paying by credit card, complete the following information:

<table>
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<tr>
<th>CREDIT CARD NUMBER</th>
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NAME (Print as it appears on card) | SIGNATURE (on card) |

Checks and money orders should be payable to: NCCCO

Please send application and payments to:

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1960 Bayshore Blvd.
Dunedin, Florida 34698
Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org
Candidate Application
WRITTEN EXAMINATION—DEDICATED PILE DRIVER OPERATOR (PAPER/PENCIL TEST ONLY)

Please type or print neatly.

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☐ I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICAN WITH DISABILITIES ACT (ADA).

(For details on NCCCO’s Testing Accommodations policy, please see www.nccco.org/accommodations.)

WRITTEN EXAMINATION FOR WHICH YOU ARE APPLYING

FILL IN the appropriate circle(s) below for correct fees.

WRITTEN EXAM/RETEST FEES

☐ Dedicated Pile Driver Operator Written Exam—new candidate (650501) ............................................................... $200

OTHER FEES

☐ Candidate Late Fee (if applicable) ................................................................. $50

☐ Incomplete Application Fee (if applicable) ....................................................... $30

☐ Updated/Replacement Card .............................................................................. $25

TOTAL AMOUNT DUE ......................................................................................... $
METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

Do not send cash.

If paying by credit card, complete the following information:

CREDIT CARD NUMBER

EXPIRATION DATE

NAME (Print as it appears on card):

SIGNATURE (on card):

SECURITY CODE*

* Three- or four-digit code located on the card.

Checks and money orders should be payable to: NCCCO

Please send application and payments to:

NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, Florida 34698

Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org
Recertification Application
WRITTEN EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR (PAPER/PENCIL TESTS ONLY)

Please type or print neatly.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME</th>
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<th>Middle</th>
<th>Last</th>
<th>Suffix (Jr, Sr, III)</th>
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- I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).
  (For details on NCCCO’s Testing Accommodations policy, please see http://www.nccco.org/accommodations)

WRITTEN EXAMINATIONS FOR WHICH YOU ARE APPLYING

This application is for recertification only. You may ONLY recertify for the designation(s) in which you are currently certified. FILL IN the circle next to the crane type(s) for which you are applying for recertification. If you would like to take Additional Examinations for cranes that you are not currently certified on, then FILL IN the examinations of your choice and CHECK the load chart you want to use for that crane type.

<table>
<thead>
<tr>
<th>EXAMINATIONS</th>
<th>LOAD CHARTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core Exam 652605</td>
<td>(Check one for each Specialty Exam)</td>
</tr>
<tr>
<td>Lattice Boom Crawler 652625</td>
<td>Terex/American</td>
</tr>
<tr>
<td>Lattice Boom Truck 652611</td>
<td>Link-Belt</td>
</tr>
<tr>
<td>Telescopic Boom Swing Cab (TLL) 652612</td>
<td>Grove (Truck Mount)</td>
</tr>
<tr>
<td>Fixed Cab (TSS) 652656</td>
<td>Manitex (Boom Truck)</td>
</tr>
<tr>
<td>Tower Crane 654602</td>
<td>National (Boom Truck)</td>
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</table>

<table>
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<tr>
<th>ADDITIONAL EXAMINATIONS</th>
<th>LOAD CHARTS</th>
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<tr>
<td>Lattice Boom Crawler 652620</td>
<td>Terex/American</td>
</tr>
<tr>
<td>Lattice Boom Truck 652609</td>
<td>Link-Belt</td>
</tr>
<tr>
<td>Telescopic Boom Swing Cab (TLL) 652611</td>
<td>Link-Belt (Rough Terrain)</td>
</tr>
<tr>
<td>Fixed Cab (TSS) 652656</td>
<td>Manitex (Boom Truck)</td>
</tr>
<tr>
<td>Tower Crane 654602</td>
<td>National (Boom Truck)</td>
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<tr>
<th>RECERTIFICATION EXAM FEES/RETEST FEES</th>
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</thead>
<tbody>
<tr>
<td>Mobile Core Exam plus one Specialty Exam 652605</td>
</tr>
<tr>
<td>Mobile Core Exam plus two Specialty Exams 652606</td>
</tr>
<tr>
<td>Mobile Core Exam plus three Specialty Exams 652611</td>
</tr>
<tr>
<td>Mobile Core Exam plus four Specialty Exams 652615</td>
</tr>
<tr>
<td>Tower Crane (only) 652612</td>
</tr>
<tr>
<td>Tower Crane (with Mobile Crane) 652645</td>
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<tr>
<td>Overhead Crane (only) 653602</td>
</tr>
<tr>
<td>Overhead Crane (with Mobile Crane) 653603</td>
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<tr>
<th>ADDITIONAL EXAM FEES*</th>
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</thead>
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<tr>
<td>Mobile Core Exam or Core plus one Specialty Exam (Retest) 652605</td>
</tr>
<tr>
<td>One Mobile Specialty Exam (Retest) 652606</td>
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<tr>
<td>Two Mobile Specialty Exams (Retest) 652611</td>
</tr>
<tr>
<td>Three Mobile Specialty Exams (Retest) 652615</td>
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<tr>
<td>Four Mobile Specialty Exams (Retest) 652619</td>
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<table>
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<tr>
<th>OTHER FEES</th>
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</thead>
<tbody>
<tr>
<td>Candidate Late Fee (if applicable) 652671</td>
</tr>
<tr>
<td>Incomplete Application Fee (if applicable) 652601</td>
</tr>
</tbody>
</table>

TOTAL AMOUNT DUE $
CANDIDATE RECERTIFICATION APPLICATION (CONT’D)
WRITTEN EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION

<table>
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<tr>
<th>TEST SITE NAME</th>
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<tr>
<td>CITY</td>
<td>STATE</td>
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<tr>
<td>TEST ADMINISTRATION NUMBER</td>
<td>DATE YOU INTEND TO TAKE THE CCO EXAMINATION</td>
</tr>
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</table>

☐ I do NOT have 1,000 hours of documented crane-related experience and must take an CCO Practical Exam for each designation for which I wish to be recertified.

I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO’s policies and procedures, including the Code of Ethics, shall constitute grounds for the rejection of my application, or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I expressly consent to NCCCO’s release of any information consistent with NCCCO’s Information Release policy. I have received a copy of the NCCCO Candidate Handbook, have read it, and agree to be bound by it. I agree to be bound by all NCCCO policies and procedures, as they may be amended from time to time, including without limitation those posted at nccco.org. I attest that I have passed a substance abuse test conducted by a recognized laboratory service and agree to comply with NCCCO’s substance abuse policy. I have passed a physical exam that complies with the ASME B30 standard for my certification designation and I will continue to comply with those requirements. I further affirm either that I have maintained at least 1,000 hours of crane-related experience in the past five years or, if I have not maintained this experience, I have checked the box above this panel indicating that before my certification expires I will take and pass a practical exam for each designation for which I wish to be recertified. I understand that if at any point during my certification period I fail to meet any of the requirements outlined above, or if matters arise that can affect my capability to continue to fulfill certification requirements, I must report it to NCCCO immediately and agree to cooperate with any subsequent investigation regarding such matters.

CANDIDATE SIGNATURE | DATE

METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

Do not send cash.

☐ Personal check enclosed ☐ Employer check enclosed ☐ Money order enclosed

If paying by credit card, complete the following information:

CREDIT CARD NUMBER | EXPIRATION DATE

NAME (Print as it appears on card) | SIGNATURE (on card)

SECURITY CODE* | * Three- or four-digit code located on the card.

Checks and money orders should be payable to: NCCCO

Please send application and payment to:
NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, Florida 34698

Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org

CANDIDATE APPLICATION CHECKLIST

☐ I have completed and signed this Recertification Exam Application.
☐ I have provided credit card information or a check or money order for the correct amount due.
☐ I have emailed a color digital photo (full face, no sunglasses, no hat) to photos@nccco.org and labeled it with my full name and birth date.
☐ I do not have a digital photo, so I am attaching a 1 ⅜” × 1 ¾” passport photo with this application.

For additional information regarding recertification, contact:
National Commission for the Certification of Crane Operators (NCCCO)
2750 Prosperity Avenue, Suite 505
Fairfax, VA 22031
Phone: 703-560-2391 info@nccco.org
Fax: 703-560-2392 www.nccco.org
Recertification Application
WRITTEN EXAMINATION—SERVICE TRUCK CRANE OPERATOR (PAPER/PENCIL TEST ONLY)

Please type or print neatly.

FULL LEGAL NAME
(as shown on driver’s license)
First
Middle
Last
Suffix (Jr., Sr., III)

CCO CERTIFICATION NUMBER (if previously certified)
DATE OF BIRTH
CANDIDATE ID:
(if previously tested)

MAILING ADDRESS

CITY
STATE
ZIP
COUNTRY

PHONE
CELL
EMAIL

COMPANY/ORGANIZATION

COMPANY PHONE

COMPANY MAILING ADDRESS

CITY
STATE
ZIP
COUNTRY

☐ I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICAN WITH DISABILITIES ACT (ADA).
(For details on NCCCO’s Testing Accommodations policy, please see www.nccco.org/accommodations.)

WRITTEN EXAMINATION FOR WHICH YOU ARE APPLYING
FILL IN the appropriate circle(s) below for correct fees.

WRITTEN EXAM/RETEST FEES

☐ Service Truck Crane Operator Recertification Exam (655102) ..................................................................................................$150

OTHER FEES
☐ Candidate Late Fee (if applicable) ..........................................................................................................................$50
☐ Incomplete Application Fee (if applicable) ..................................................................................................................$30
☐ Updated/Replacement Card .............................................................................................................................$25

TOTAL AMOUNT DUE .................................................................................................................................$
I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO’s policies and procedures, including the Code of Ethics, shall constitute grounds for the rejection of my application, or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I expressly consent to NCCCO’s release of any information consistent with NCCCO’s Information Release policy. I have received a copy of the NCCCO Candidate Handbook, have read it, and agree to be bound by it. I agree to be bound by all NCCCO policies and procedures, as they may be amended from time to time, including without limitation those posted at nccco.org. I attest that I have passed a substance abuse test conducted by a recognized laboratory service and agree to comply with NCCCO’s substance abuse policy. I have passed a physical exam that complies with the requirements for my certification designation and I will continue to comply with those requirements. I further affirm either that I have maintained at least 500 hours of crane-related experience in the past five years or, if I have not maintained this experience, I have checked the box above this panel indicating that before my certification expires I will take and pass a practical exam for each designation for which I wish to be recertified. I understand that if at any point during my certification period I fail to meet any of the requirements outlined above, or if matters arise that can affect my capability to continue to fulfill certification requirements, I must report it to NCCCO immediately and agree to cooperate with any subsequent investigation regarding such matters.

Candidate Signature

Date

METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

Do not send cash.

☐ VISA ☐ MasterCard ☐ American Express
☐ Personal check enclosed ☐ Employer check enclosed ☐ Money Order enclosed Please do not staple your check or money order.

If paying by credit card, complete the following information:

Credit Card Number

EXPIRATION DATE

Name (Print as it appears on card)

Signature (on card)

Security Code*

* Three- or four-digit code located on the card.

Checks and money orders should be payable to: NCCCO

Please send application and payments to:

NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, Florida 34698

Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org
Recertification Application
WRITTEN EXAMINATION—ARTICULATING CRANE OPERATOR (PAPER/PENCIL TESTS ONLY)

Please type or print neatly.

FULL LEGAL NAME
(First Middle Last Suffix (Jr., Sr., III)

CCO CERTIFICATION NUMBER

DATE OF BIRTH

CANDIDATE ID:
(if previously tested)

MAILING ADDRESS

CITY

STATE

ZIP

COUNTRY

PHONE

CELL

EMAIL

COMPANY/ORGANIZATION

COMPANY PHONE

COMPANY MAILING ADDRESS

CITY

STATE

ZIP

COUNTRY

☐ I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).
(For details on NCCCO’s Testing Accommodations policy, please see http://www.nccco.org/accommodations)

WRITTEN EXAMINATION FOR WHICH YOU ARE APPLYING

FILL IN the circle next to the Written Examination for which you are applying (only one) and indicate the appropriate fee(s). Total the amount due at bottom.

WRITTEN EXAMS

Please refer to the Written Exam Content Outlines for the contents of each exam.

☐ Articulating Boom Crane (ABC) 652905
☐ Articulating Boom Crane w/Winch (ABW) 652906
☐ Articulating Boom Loader (ABL) 652904

RECERTIFICATION EXAM FEES/RETEST FEES

☐ Written Exam…………………………………………………..$150
☐ Written Exam—Current CCO–certified Mobile Crane Operator………………………………………..$50
☐ Written Exam—registering for Mobile Crane Operator exams at same time as Articulating Crane Operator recertification exam ……………………..$50

OTHER FEES

☐ Candidate Late Fee (if applicable) ……………………..$50
☐ Incomplete Application Fee (if applicable) ……………$30
☐ Updated CCO certification card (ONLY for candidates adding to existing operator certifications)………………………………………..$25

TOTAL AMOUNT DUE …………………….. $
RECERTIFICATION APPLICATION (CONT’D)
WRITTEN EXAMINATION—ARTICULATING CRANE OPERATOR

TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION

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☐ I do NOT have 1,000 hours of documented crane-related experience and must take an CCO Practical Exam for each designation for which I wish to be recertified.

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METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

☐ [ ] Personal check enclosed
☐ [ ] Employer check enclosed
☐ [ ] Money Order enclosed

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1960 Bayshore Blvd.
Dunedin, Florida 34698

Phone: 727-449-8525
Fax: 727-461-2746
Email: kqualls@nccco.org

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### Candidate Application

**WRITTEN EXAMINATION—CRANE INSPECTOR**

**PAPER/PENCIL TESTS ONLY**

Please type or print neatly.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME</th>
<th>First</th>
<th>Middle</th>
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<th>DATE OF BIRTH</th>
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<tr>
<td>CCO INSPECTOR CERTIFICATION NUMBER (if previously certified)</td>
<td>DATE OF BIRTH</td>
<td>CANDIDATE ID: (if previously tested)</td>
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I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).

(For details on NCCCO's Testing Accommodations policy, please see [www.nccco.org/accommodations](http://www.nccco.org/accommodations))

ARE YOU A CURRENTLY CCO-CERTIFIED CRANE OPERATOR IN GOOD STANDING?  Yes  No

If you checked "yes" above, indicate your CCO operator certification number below and the cranes you are certified to operate at right:

CCO operator certification #: 

- Mobile Crane
- Tower Crane
- Overhead Crane

**WRITTEN EXAMINATION FOR WHICH YOU ARE APPLYING**

*FILL IN the circle next to the crane type(s) for which you are applying. Total the amount due at bottom.*

**EXAM DESCRIPTIONS AND FEES**

- Core Crane Inspector Exam (required for Mobile and/or Tower Crane Inspector) 711101 $250
- Mobile Crane Inspector Specialty Exam 711102 $250
- Tower Crane Inspector Specialty Exam 711104 $250
- Overhead Crane Comprehensive Exam 711103 $350
- Mobile Crane Core Operator Exam* 652603 $165
- Tower Crane Operator Exam* 654601 $165
- Overhead Crane Operator Exam* 653601 $165
- Tower Crane Operator Exam* (if already CCO-certified or taking with Mobile Crane Operator Exam) 654601 $50
- Overhead Crane Operator Exam* (if already CCO-certified or taking with Mobile Crane Operator Exam) 653601 $50

*Currently CCO-certified operators are not required to take the corresponding operator exam(s), as long they maintain their certification status in good standing.*

**OTHER FEES**

- Candidate Late Fee (if applicable) $50
- Incomplete Application Fee (if applicable) $30
- Updated/Replacement Card $25

ADD TO TOTAL AMOUNT AT RIGHT  TOTAL AMOUNT DUE $

For logistical reasons, and in fairness to each candidate, it is not recommended that a candidate schedule written exams totaling more than six hours of testing time on the same day.
CANDIDATE APPLICATION (CONT’D)
CRANE INSPECTOR WRITTEN EXAMINATION(S)

TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION

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</table>

CCO CERTIFICATION CARD

Candidates who meet all the requirements for certification in any one designation are issued a certification card at no charge. Replacement and updated cards are available for an additional fee; see panel below.

Please email a digital color photo (without hat or sunglasses) to photos@nccco.org and label it with your full name and birth date. Enclose with your application form any required payment based upon the information listed below.

A 1⅜” × 1⅛” passport color photo may be substituted for a digital photo; if submitting a passport photo, please give it to your Test Site Coordinator.

METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

- [ ] VISA
- [ ] MASTERCARD
- [ ] DISCOVER
- [ ] Personal check enclosed
- [ ] Employer check enclosed
- [ ] Money Order enclosed

Do not send cash.

If paying by credit card, complete the following information:

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<th>SECURITY CODE*</th>
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| * Three- or four-digit code located on the card.

Checks and money orders should be payable to: NCCCO

Please send application and payments to:

NCCCO—Testing Services Department
5250 S. Commerce Drive, Suite 100
Murray, Utah 84107

Phone: 727-449-8525
Fax: 801-938-9540
Email: kqualls@nccco.org
Recertification Application

WRITTEN EXAMINATIONS—CRANE INSPECTOR (PAPER/PENCIL TEST ONLY)

Please type or print neatly.

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<th>FULL LEGAL NAME</th>
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<th>Middle</th>
<th>Last</th>
<th>Suffix (Jr., Sr., III)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCO CERTIFICATION NUMBER</td>
<td>Date of Birth</td>
<td>Candidate ID:</td>
<td></td>
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</tr>
<tr>
<td>Mailing Address</td>
<td>City</td>
<td>State</td>
<td>Zip</td>
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<tr>
<td>Phone</td>
<td>Cell</td>
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<tr>
<td>Company/Organization</td>
<td>Company Phone</td>
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<tr>
<td>Company Mailing Address</td>
<td>City</td>
<td>State</td>
<td>Zip</td>
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</tbody>
</table>

☐ I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).
(For details on NCCCO’s Testing Accommodations policy, please see www.nccco.org/accommodations)

WRITTEN EXAMINATIONS FOR WHICH YOU ARE APPLYING

This application is for recertification only. You may ONLY recertify for the designation(s) in which you are currently certified. FILL IN the circle next to the exams for which you are applying for recertification. If you would like to take Additional Examinations for inspecting cranes that you are not currently certified on, then FILL IN the examinations of your choice.

RECERTIFICATION EXAMINATIONS & FEES

| CRANE INSPECTOR RECERTIFICATION EXAMS | | | |
| Core Exam 711201 | $225 |
| Mobile Crane Specialty 711202 | $225 |
| Tower Crane Specialty 711204 | $225 |
| Overhead Crane Comprehensive 711203 | $315 |

SUBTOTAL (RECERTIFICATION EXAMS): $

For logistical reasons, and in fairness to each candidate, it is not recommended that a candidate schedule written exams totaling more than six hours of testing time on the same day.

ADDITIONAL EXAMINATIONS & FEES

| CRANE INSPECTOR EXAMS | | |
| Core Exam 711101 | $250 |
| Mobile Crane Specialty 711102 | $250 |
| Tower Crane Specialty 711104 | $250 |
| Overhead Crane Comprehensive 711103 | $350 |

| CRANE OPERATOR WRITTEN EXAMS | | |
| Mobile Crane Operator Core* 652603 | $165 |
| Tower Crane Operator* 654601 | $165 |
| Overhead Crane Operator* 653601 | $165 |
| Tower Crane Operator* (if CCO-certified Mobile Crane Operator) 654601 | $50 |
| Overhead Crane Operator* (if CCO-certified Mobile Crane Operator) 653601 | $50 |

*Crane Inspector recertificants are required to take and pass the corresponding operator written exam(s) at recertification. Currently CCO-certified operators are not required to take the corresponding operator exam(s), as long as they maintain their certification status in good standing. Otherwise, corresponding written operator exams are required for either recertification or for adding additional Crane Inspector specialties.

OTHER FEES

| Candidate Late Fee (if applicable) | $50 |
| Incomplete Application Fee (if applicable) | $30 |
| Updated/Replacement Card | $25 |

TOTAL AMOUNT DUE $
**RECERTIFICATION APPLICATION (CONT’D)**

**CRANE INSPECTOR WRITTEN EXAMINATION(S)**

**TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION**

<table>
<thead>
<tr>
<th>TEST SITE NAME</th>
<th>TEST SITE COORDINATOR</th>
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<tr>
<th>TEST ADMINISTRATION NUMBER</th>
<th>DATE YOU INTEND TO TAKE THE CCO EXAMINATION</th>
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</table>

☐ I do NOT have 1,000 hours of documented crane inspection–related experience during this last certification cycle and must take the initial Crane Inspector written exam for each designation for which I wish to be recertified.

I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO’s policies and procedures, including the Code of Ethics, shall constitute grounds for the rejection of my application, or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I expressly consent to NCCCO’s release of any information consistent with NCCCO’s Information Release policy. I have received a copy of the NCCCO Candidate Handbook, have read it, and agree to be bound by it. I agree to be bound by all NCCCO policies and procedures, as they may be amended from time to time, including without limitation those posted at nccco.org. I have passed a substance abuse test conducted by a recognized laboratory service and agree to comply with NCCCO’s substance abuse policy. I attest that I am in good physical health, as verified by a medical professional, sufficient enough to handle the physical demands that crane inspections require. I further affirm either that I have maintained at least 1,000 hours of crane-inspection experience in the past five years or, if I have not maintained this experience, I have checked the box above this panel indicating that before my certification expires I will take and pass the initial written examination for each designation for which I wish to be recertified. I understand that if at any point during my certification period I fail to meet any of the requirements outlined above, or if matters arise that can affect my capability to continue to fulfill certification requirements, I must report it to NCCCO immediately and agree to cooperate with any subsequent investigation regarding such matters.

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<th>CANDIDATE SIGNATURE</th>
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**CCO CERTIFICATION CARD**

Candidates who meet all the requirements for certification in any one designation are issued a certification card at no charge. Replacement and updated cards are available for an additional fee; see panel below.

Please email a digital color photo (without hat or sunglasses) to photos@nccco.org and label it with your full name and birth date. Enclose with your application form any required payment based upon the information listed below.

A 1¾” × 1¼” passport color photo may be substituted for a digital photo; if submitting a passport photo, please give it to your Test Site Coordinator.

**METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES**

<table>
<thead>
<tr>
<th>Method of Payment</th>
<th>Fee</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>VISA</td>
<td></td>
<td>Personal check enclosed</td>
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<tr>
<td>MasterCard</td>
<td></td>
<td>Employer check enclosed</td>
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<tr>
<td>Checks</td>
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<td>Money Order enclosed</td>
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</table>

Do not send cash.

If paying by credit card, complete the following information:

<table>
<thead>
<tr>
<th>CREDIT CARD NUMBER</th>
<th>EXPIRATION DATE</th>
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<th>NAME (Print as it appears on card)</th>
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Securty Code*:

* Three- or four-digit code located on the card.

Checks and money orders should be payable to: **NCCCO**

Please send application and payments to:

NCCCO—Testing Services Department
5250 S. Commerce Drive, Suite 100
Murray, Utah 84107

Email: kqualls@nccco.org
Phone: 727-449-8525
Fax: 801-938-9540

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Candidate Application

WRITTEN EXAMINATIONS—LIFT DIRECTOR
(PAPER/PENCIL TEST ONLY)

Please type or print neatly.

FULL LEGAL NAME
(First Middle Last Suffix)

CANDIDATE ID:

DATE OF BIRTH

MAILING ADDRESS

PHONE

COMPANY/ORGANIZATION

COMPANY MAILING ADDRESS

CCO CERTIFICATION NUMBER (if previously certified)

U.S. POSTAL ZIP CODE

DATE

COUNTRY

E-MAIL

SEX

STATE

CITY

ZIP

COUNTRY

 Are you a currently CCO-certified crane operator in good standing? ☐ Yes ☐ No

If you checked "yes" above, what is your CCO operator certification number?

Also please indicate the cranes you are certified to operate: ☐ Mobile Cranes ☐ Tower Cranes

WRITTEN EXAMINATION(S) FOR WHICH YOU ARE APPLYING

FILL IN the circle next to the crane type(s) for which you are applying. Total the amount due at bottom.

WRITTEN EXAMS

☐ Lift Director Core Exam 811101
☐ Lift Director Mobile Crane Specialty 811201
☐ Lift Director Tower Crane Specialty 811301

☐ Mobile Crane Operator Core Exam 652603
☐ Mobile Crane Operator LADLE CHARTS

☐ Lattice Boom Crawler 652620 ☐ American LBC
☐ Lattice Boom Truck 652609 ☐ Link-Belt LBT

☐ Telescopic Boom—Swing Cab Specialty 652613 ☐ Link-Belt TLL (Rough Terrain)

☐ Telescopic Boom—Fixed Cab Specialty 652660 ☐ Shuttlelift (Carr Deck)

☐ Tower Crane Operator 654601
☐ Rigger Level II 652802

LIFT DIRECTOR EXAMS

☐ Lift Director Core Exam 811101 ☐ Lift Director Mobile Crane Specialty 811201
☐ Lift Director Tower Crane Specialty 811301

☐ Mobile Crane Operator LOAD CHARTS

☐ Lattice Boom Crawler 652620 ☐ American LBC
☐ Lattice Boom Truck 652609 ☐ Link-Belt LBT

☐ Telescopic Boom—Swing Cab Specialty 652613 ☐ Link-Belt TLL (Rough Terrain)

☐ Telescopic Boom—Fixed Cab Specialty 652660 ☐ Shuttlelift (Carry Deck)

☐ Tower Crane Operator 654601
☐ Rigger Level II 652802

OTHER FEES

☐ Candidate Late Fee (if applicable) $50
☐ Incomplete Application Fee (if applicable) $30
☐ Updated/Replacement Card $25

ADD TO TOTAL AMOUNT AT RIGHT

LIFT DIRECTOR EXAMS

☐ Mobile Crane Operator LOAD CHARTS

☐ Lattice Boom Crawler 652620 ☐ American LBC
☐ Lattice Boom Truck 652609 ☐ Link-Belt LBT

☐ Telescopic Boom—Swing Cab Specialty 652613 ☐ Link-Belt TLL (Rough Terrain)

☐ Telescopic Boom—Fixed Cab Specialty 652660 ☐ Shuttlelift (Carry Deck)

☐ Tower Crane Operator 654601
☐ Rigger Level II 652802

MOBILE CRANE OPERATOR EXAMS

☐ Core Exam plus one Specialty Exam (Initial or Retest), $165
☐ Core Exam plus two Specialty Exams (Initial or Retest) $175
☐ One Specialty Exam (Retest or Added Specialty) $65
☐ Two Specialty Exams (Retest or Added Specialty) $75

TOWER CRANE OPERATOR EXAM

☐ Tower Crane Written Exam (new Candidate) $165
☐ Tower Crane Written Exam (current CCO-certified Mobile Crane Operator, or new candidate taking exam same time as Mobile Crane exams) $50

RIGGER LEVEL II EXAM

☐ Rigger Level II Written Exam (new Candidate) $95
☐ Rigger Level II Written Exam (current CCO-certified card holder or new candidate taking exam same time as Lift Director exams) $75

TOTAL AMOUNT DUE

For logistical reasons, and in fairness to each candidate, it is not recommended that a candidate schedule written exams totaling more than six hours of testing time on the same day.

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45
### CANDIDATE APPLICATION (CONT’D)

#### LIFT DIRECTOR WRITTEN EXAMINATION(S)

**TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION**

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I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO’s policies and procedures, including the Code of Ethics, shall constitute grounds for the rejection of my application, or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I expressly consent to NCCCO’s release of any information consistent with NCCCO’s Information Release policy. I have received a copy of the NCCCO Candidate Handbook, have read it, and agree to be bound by it. I agree to be bound by all NCCCO policies and procedures, as they may be amended from time to time, including without limitation those posted at nccco.org. I have passed a substance abuse test conducted by a recognized laboratory service and agree to comply with NCCCO’s substance abuse policy. I attest that I am in good physical health, as verified by a medical professional, sufficient enough to handle the physical demands that directing lifts requires. I understand that if at any point during my certification period I fail to meet any of the requirements outlined above, or if matters arise that can affect my capability to continue to fulfill certification requirements, I must report it to NCCCO immediately and agree to cooperate with any subsequent investigation regarding such matters.

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### CCO CERTIFICATION CARD

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Please email a digital color photo (without hat or sunglasses) to photos@nccco.org and label it with your full name and birth date. Enclose with your application form any required payment based upon the information listed below.

A 1 ⅜” x 1 ¾” passport color photo may be substituted for a digital photo; if submitting a passport photo, please give it to your Test Site Coordinator.

### METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

- [ ] VISA
- [ ] MasterCard
- [ ] American Express
- [ ] Personal check enclosed
- [ ] Employer check enclosed
- [ ] Money Order enclosed

*Do not send cash.*

If paying by credit card, complete the following information:

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<thead>
<tr>
<th>CREDIT CARD NUMBER</th>
<th>EXPIRATION DATE</th>
<th>SECURITY CODE*</th>
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Please send application and payments to:

| NCCCO—Testing Services Department | Email: kqualls@nccco.org |
| 1960 Bayshore Blvd.               | Phone: 727-449-8525     |
| Dunedin, Florida 34698           | Fax: 801-938-9540       |

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Change of Address Form

Please use this form to advise of any changes of address. Please mail, fax, or email this completed form to:

NCCCO—Testing Services Department
1960 Bayshore Blvd.
Dunedin, Florida 34698

Phone: 727-449-8525
Fax: 727-461-2746
Email: info@nccco.org

Please type or print neatly.

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<th>FULL LEGAL NAME</th>
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<tbody>
<tr>
<td>CCO CERTIFICATION NUMBER</td>
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OLD ADDRESS

MAILING ADDRESS

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NEW ADDRESS

MAILING ADDRESS

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EFFECTIVE DATE OF CHANGE


NCCCO Information Release Policy

A. Definitions

1. “NCCCO” means and refers to the National Commission for the Certification of Crane Operators acting through its staff and authorized agents and representatives.

2. "Releasable Information" means and refers to the following information: name, certification status, examination dates, certification dates, certification number(s), and designations. In the case of accredited Practical Examiners, "Releasable Information" also means and refers to the following information: name, accreditation status, accreditation dates, accreditation number, and categories in which the Practical Examiner is authorized to administer exams.

3. “Third Party” means and refers to an employer, prospective employer, regulatory agency, or any other person or entity that makes an inquiry to NCCCO.

B. Policies

1. It shall be the policy of NCCCO to provide Releasable Information pertaining to individuals who have successfully passed one or more NCCCO examinations. It shall also be the policy of NCCCO to provide Releasable Information pertaining to such individuals on its website using such protocols as may be established. In addition, it shall be the policy of NCCCO to provide information, as appropriate, concerning individuals who have been sanctioned, suspended or revoked from participation in NCCCO’s programs, using such protocols as may be established.

2. Releasable Information may be released to a Third Party who makes a written request, including by electronic correspondence. Generally, Releasable Information will be released within one business day from actual receipt of a written request.

3. If a Third Party requests information concerning an individual who has not taken or successfully passed an NCCCO examination, NCCCO may release a statement confirming that, as of a given date, the individual does not appear on NCCCO’s list of successful candidates in one or more categories of certification.

4. If an applicant or certificant is under formal sanction, suspension, or revocation by NCCCO, then NCCCO may release a statement to that effect to any persons and by any reasonable means, including by means of a list published on the NCCCO website. In addition, if an individual applicant or certificant is under formal investigation, sanction, suspension, or revocation by NCCCO, then NCCCO may release a statement concerning the status of the applicant or certificant to any Third Party and to any jurisdiction that requires or accepts CCO certification as a basis for satisfying requirements to work in the jurisdiction. Any such statement to a Third Party or jurisdiction may identify the applicant or certificant, the certifications affected, the actions taken, and the effective dates of any such actions.

5. If an accredited Practical Examiner, authorized Test Site Coordinator, listed Training Provider, or other authorized participant in NCCCO’s programs (“Authorized Participant”) is under formal sanction, suspension, or revocation by NCCCO, then NCCCO may release a statement to that effect to any persons and by any reasonable means, including by means of a list published on the NCCCO website. In addition, if an Authorized Participant is under formal investigation, sanction, suspension, or revocation by NCCCO, then NCCCO may release a statement concerning the status of the Authorized Participant to any persons and by any reasonable means, including by means of a list published on the NCCCO website. Any such statement may identify the Authorized Participant, the credentials or capacities affected, the actions taken, and the effective dates of any such actions.

6. If a Third Party seeks information other than the foregoing information, generally, absent a subpoena or similar legal process, such information will not be released. However, in the course of business, as circumstances reasonably warrant, NCCCO reserves the discretion to release information other than the foregoing information.

7. Certain situations may require or warrant the immediate verbal confirmation of an individual’s certification status or other Releasable Information in response to a written or verbal request. Under such circumstances, NCCCO may provide such immediate verbal confirmation, at its discretion. When such a verbal confirmation is provided, it shall be NCCCO’s policy to follow up with a written confirmation.

8. It shall be the policy of NCCCO to discuss score-related and test-specific matters only with a candidate or a candidate’s authorized legal representative.

9. NCCCO will release Releasable Information about an individual upon receipt of a written request (including electronic correspondence) from that individual. NCCCO may release information other than Releasable Information about an individual, at its discretion, upon receipt of a signed, notarized, written request from that individual. In addition, NCCCO will release information other than Releasable Information about an individual when required by a legal authority of competent jurisdiction under a duly-issued subpoena, subject to any objection, or as otherwise required by law.
Summary of Changes
WRITTEN EXAM TEST SITE COORDINATOR HANDBOOK

Following approval by the appropriate NCCCO committees, Commissioners, and/or Board of Directors, the following substantive (non-editorial) changes have been made to the Written Exam Test Site Coordinator Handbook (major programmatic changes covered in Practical Examiner Bulletins are in bold):

Changes made 03/18:

<table>
<thead>
<tr>
<th>Page(s)</th>
<th>Section</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>9, 21</td>
<td>Score Reporting</td>
<td>Test Site Coordinators now automatically receive Pass/Fail Reports for both written and practical exams at no charge. A Pass/Fail Report Request Form is no longer required to be submitted.</td>
</tr>
<tr>
<td>26, 28, 30, 32, 34, 36, 40, 42, 44, 46</td>
<td>Candidate Applications</td>
<td>Updated candidate attestation statement</td>
</tr>
<tr>
<td>37–38</td>
<td>Service Truck Crane Operator Recertification Application</td>
<td>Added new Service Truck Crane Operator Recertification Application</td>
</tr>
<tr>
<td>48</td>
<td>Information Release Policy</td>
<td>Added the NCCCO Information Release Policy</td>
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Changes made 09/17:

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<th>Change</th>
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<tbody>
<tr>
<td>9</td>
<td>Emergency Cancellations or Withdrawals</td>
<td>Replaced “Social Security number” with “Candidate ID/CCO Certification number”</td>
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<tr>
<td>10</td>
<td>Practical Examination</td>
<td>Added that candidates may petition for an extension of standard timeline</td>
</tr>
<tr>
<td>42, 44</td>
<td>Crane Inspector Applications</td>
<td>Changed mailing address for submitting written exam applications to Murray, UT</td>
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Changes made 02/17:

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<th>Section</th>
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<tbody>
<tr>
<td>8</td>
<td>Candidate Application Fees</td>
<td>Recertification and Recertification Retest fees added for: Service Truck Crane Operator, Digger Derrick Operator, and Crane Inspector exams. All written exam fees for new Dedicated Pile Driver program</td>
</tr>
<tr>
<td>15</td>
<td>Written Test Administration Request Form</td>
<td>Added new column for Dedicated Pile Driver exam</td>
</tr>
<tr>
<td>23–25</td>
<td>Detailed Score Report &amp; Pass-Fail Report Requests</td>
<td>Removed “Social Security Number” field and replaced with “Date of Birth”</td>
</tr>
<tr>
<td>26</td>
<td>Security Requirements Report</td>
<td>Tailored form for Written Test Administrations</td>
</tr>
<tr>
<td>37–38</td>
<td>Candidate Application—Dedicated Pile Driver Operator Written Examination</td>
<td>Added application for new program</td>
</tr>
<tr>
<td>40</td>
<td>Recertification Application—Mobile, Tower, Overhead</td>
<td>Removed box for passport photo and added email to send digital photo</td>
</tr>
<tr>
<td>44</td>
<td>Candidate Application—Crane Inspector</td>
<td>Removed box for passport photo and added email to send digital photo</td>
</tr>
<tr>
<td>45–46</td>
<td>Recertification Application—Crane Inspector</td>
<td>Added new recertification application</td>
</tr>
<tr>
<td>48</td>
<td>Candidate Application—Lift Director</td>
<td>Removed box for passport photo and added email to send digital photo</td>
</tr>
<tr>
<td>---</td>
<td>Physical Examination Form &amp; Physician Instructions</td>
<td>Removed from handbook; refer to individual Candidate Handbooks for updated physical evaluation requirements</td>
</tr>
<tr>
<td>49</td>
<td>Change of Address Form</td>
<td>Removed Social Security Number field and added Date of Birth and Candidate ID fields</td>
</tr>
</tbody>
</table>
IMPORTANT CONTACT INFORMATION

NATIONAL COMMISSION FOR THE CERTIFICATION OF CRANE OPERATORS

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