

To:			
Instant Norge AS E-mail: info@instantkurs.no			
		Data	20
		Date:/	20
Confirmation of practical training	g in scaffold building		
Information about the course use	er:		
The undersigned hereby confrms that		born	has
completed hours of pro			
Information about the person sig	ning the confirmation (competent p	person):	
		,	
Name: -			
Company:			
_			
Position:			
Phone:			
_			
E-mail:			
Signature:			
A conv of the undersigned's certifi	cate of competence must be attach	ed to this document wh	an

submitting.