

To:

Instant Norge AS

E-mail:

info@instantkurs.no

Date: ____ / ____ - 20____

Confirmation of practical training in the use of dangerous hand tools

Information about the course user:

The undersigned hereby confirm that _____ born _____
has completed the practical training in the use of the following dangerous hand tool(s) :

Saws with sawblade:

Reciprocating saw (A1)

Table saw (A2)

Miter saw (A3)

Circular saw (A4)

Jigsaw (A5)

Saws with chain:

Chainsaw (B)

Guns:

Nail gun (C1)

Bolt pistol (C2)

Grinders:

Angle grinder (D)

Drills:

Combination hammer (E)

Information about the person signing the confirmation (competent person):

Name: _____

Company: _____

Position: _____

Phone: _____

E-mail: _____

Signature: _____