



SOUTH AFRICAN REFRIGERATION & AIR CONDITIONING CONTRACTORS' ASSOCIATION

Reception/Membership: saracca@icon.co.za | Registrations: suzette@saracca.co.za | Accounts: cathy@saracca.co.za
Contact: 011 622 3890 | 011 622 3891 • VAT Number 45 00 11 67 61 • Website: www.saracca.co.za

Update / Upgrade Application for Registration as an Authorised Gas Practitioner

I hereby apply for registration as a Refrigerant gas installer for Air Conditioning and Refrigeration in terms of the Occupational Health and Safety Act (No. 85 of 1993) – Sections 43 and 44 and Regulation R734 of 15 July 2009 – “Pressure Equipment Regulations (PER)”

Registrations are only valid within the borders of the Republic of South Africa

Registrations are only valid for a period of 3 years, after which a refresher course must be attended, and renewal of registration is completed. Upgrading / Updating does not change expiry date.

In the interest of speedy processing of application, it is imperative that you complete **all required** fields and fully comply with the SARACCA Scope and Competency Policy Guide (as amended) for being an Authorised Refrigeration Gas Practitioner.

Supporting Documents for your application

- Certified ID | Passport with Valid Work Permit
- Trade Certificate and/or Industry Related Qualifications – For upgrades
- Company Letterhead confirming VAT/Invoicing Details

Only electronic copies of applications will be accepted in PDF format.

Application must be submitted within 6 MONTHS of completion of the Safe Handling Course

Bank account details:

First National Bank;
Branch : 252155 – Bedford Gardens
Account : 59630030903 (current account)

- Payment to be made once SARACCA Reference Number is confirmed
- Proof of payment to be emailed to suzette@saracca.co.za or cathy@saracca.co.za

If paid by a VAT Registered Company, a FULL company letter head confirming the VAT /Invoicing details is required before the application will be processed.

Upgrade / Update Fee – R400.00 VAT INCLUDED

Fee and Application form valid until February 2024

Practitioner Personal Details													
SAQCC Licence / Registration Number:													
Training Manual Number							Date on Certificate						
Training Centre:													
Full Name													
Surname													
ID Number													
Contact Number													
Email address													
Current Position at Company													
Details to be double checked to ensure you receive an OTP for the SAQCC Gas App Registration													

Current Employer Details													
Company Name													
Company Address													
Accounts Contact name													
Accounts Contact Number													
Accounts Email													
Company VAT for Invoicing and Accounting Purposes													

Previous Employer													
Company													
Dates Employed	From							To					
Position Held													
Contact Person for Reference													

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Upgrade – Qualifications obtained since original registration:

Trade Qualification - Red Seal			
Trade / Learnership field			
Institution			
Period	From		To
Employer during apprenticeship / learnership			

Reason for Replacement Card Request:

Tick box applicable			
Lost or Stolen Card		Updated Qualification	
Change of Employer		Add new category	

I confirm that the information provided by me in my application is correct, valid and that all certificated and documentation is attached.

Signed by APPLICANT

Date