|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Inspector:** |  | **Organisation:** |  | **Inspector Signature:** |  |
| **Technical Expert Name:** |  | **Technical Expert Signature:** |  | **Date:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Category /Sub category** | | **Process Verification Inspection** | | **Technical Expert Review** | |
| **Inspector**  *(Refer to Note 1)* | **TE Review**  Agree / Disagree  Y/N | Witness/ interview  W/I | **Comments** |
| Screening assessment using accredited laboratory sample testing in accordance with NZS 8510:2017 (section 3.2) | Residential properties |  |  |  |  |
| Commercial properties |  |  |  |
| Boats |  |  |  |
| Road vehicles |  |  |  |
| Detailed pre-decontamination assessment in accordance with NZS 8510:2017 (section 3.3) | Residential properties |  |  |  |  |
| Commercial properties |  |  |  |
| Boats |  |  |  |
| Road vehicles |  |  |  |
| Detailed post decontamination assessment in accordance with NZS 8510:2017 (section 5) | Residential properties |  |  |  |  |
| Commercial properties |  |  |  |
| Boats |  |  |  |
| Road vehicles |  |  |  |

**Please Complete shaded sections only and submit to IANZ**

**Note 1:** Competence Model inspectors: indicate which categories the inspector has been authorised for, either as a trainee (T), inspector (I) or a signatory (S)

Signatory Model signatories: indicate if this is an initial assessment (IA) or a re-assessment (R) for each of the relevant categories