

CCO CERTIFIED CRANE OPERATOR BOOT CAMP SCHOOL

In order to be enrolled into this Certified Crane Operator Boot Camp School you must complete this enrollment package and fax it back to (877) 429-6287. Classes are strictly limited to the first 5 candidates, so this is a "first come first served" basis.

DATES: Monday October 5 to Sunday October 11, 2020

DURATION: 7 Days

HOURS: Class starts at 7:00 AM each day

LOCATION: Class, Exam & Practicals will be held at: NATIONWIDE CRANE TRAINING

2661 N.E. 46th Ave, Des Moines, IA 50317

PLEASE NOTE: Candidates must wear safety goggles, safety vest and steel toed work boots or composite when operating the crane. Please dress comfortably for the classroom. Please bring a photo ID to present at time of the written exam.

THIS CLASS IS DESIGNED FOR THE OPERATOR WITH "NO" EXPERIENCE AND WHO WANTS TO DEVELOP THE BEST SKILLS TO BECOME AN NCCCO CERTIFIED CRANE OPERATOR.

The instructor for the class is Ron Rowley, an NCCCO Practical Examiner. You are responsible for your own travel arrangements and accommodations. A list of local accommodations is included in this package. Nationwide Crane Training does not endorse nor has any affiliation with any of these local accommodations. We merely provide them as a courtesy. If you have any questions about anything, please do not hesitate to call.

Teri Drapeau

NATIONWIDE CRANE TRAINING

<u>Teri@nationwidecranetraining.com</u>

Office: (877) NCT-CRANE (628-2726)

Fax: (877) 429-6287

5650 Madras Street, Washoe Valley, NV 89704

NationwideCraneTraining.com



EDWOSB and WOSB



ENROLLMENT PACKAGES

You have enrolled into one of the finest Crane Training Schools available. Nationwide Crane Training sponsors the NCCCO, a nationally recognized leader in the Certification of Crane Operators. This class is strictly limited to the first five (5) candidates and is based on a first come first serve basis.

PACKAGE #1 (1 endorsement)

\$ 5,500.00

New operators TSS (Small fixed cab Telescopic Boom Truck endorsement)

Please note: the TSS endorsement also includes the STC (service truck endorsement) and the BTF (Boom Truck endorsement). Three endorsements for the price of one.

PACKAGE #2 (1 endorsement)

\$ 5,500.00

New operators TLL (Large swing cab Telescopic Boom Truck endorsement)

EACH OPERATOR ONE-ON-ONE PRACTICAL HANDS ON INSTRUCTION AND SKILL \$ included NCCCO PRACTICAL EXAM FEES \$ included NCCCO / IAI WRITTEN EXAM FEES \$ included STUDY / REFERENCE MATERIALS \$ included

If you would like to take both endorsements the price is \$7,500.00 total

- ➤ This is a 5-year NCCCO Certification
- > Two Written Exams for each student: (Core + TSS /TLL)
- > One Practical Exam for each student: (TSS/TLL)

This price covers all application fees, crane cads, crane rental, test weights, and practicals. This price does NOT cover any additional late application fees. This class is strictly limited to the first five (5) candidates, based on a first-come, first-serve. We hope that you find this quote satisfactory. If you have any questions, please call me or reply to this email.

Teri Drapeau

 $\underline{\text{Teri@nationwidecranetraining.com}}$

Office: (877) NCT-CRANE (628-2726)

Fax: (877) 429-6287 Cell: (951) 283-1110

NationwideCraneTraining.com

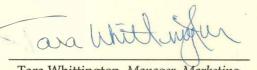
The National Commission for the Certification of Crane Operators (NCCCO) hereby recognizes

Nationwide Crane Training

as having successfully applied for listing in the

2020 NCCCO Training Providers Directory

with permission to use the NCCCO Marks consistent with NCCCO's policies



Tara Whittington, Manager, Marketing



Thom Sicklesteel, Chief Executive Officer

SOME OF OUR PAST CUSTOMERS

- AGC (American General Contractors Association) Training Providers of their members
- BP
- CALFRAC
- CASEDHOLE SOLUTIONS / NABORS / SWSI
- CHEVRON
- CITY OF BREMERTON, WA (Dept of Water and Power)
- CITY OF LONG BEACH, CA (Dept of Water and Power)
- CITY OF DES MOINES, IA (Dept of Water and Power)
- CITY OF TUCSON, AZ (Dept of Water and Power)
- C & J ENERGY
- DUQUESNE LIGHT (Dept of Power)
- EDISON SOUTHERN CALIFORNIA EDISON AND EDISON MISSION
- FPL (Florida Power & Light Company)
- HALIBURTON
- HONEYWELL
- I.E.U.A, CA (Inland Empire Utilities Agency)
- KEY ENERGY (Dept of Power)
- KIEWIT
- L.A.D.P.W (Los Angeles Department of Public Works)
- NASA
- NEXTERA ENERGY RESOURCES
- O.C.F.A, CA (Orange County Fire Authority)
- PORT OF LONG BEACH, CA (Harbor)
- SCHLUMBERGER
- SHELL REFINERY
- SOUTHWEST GAS CORP ARIZONA & NEVADA
- TEAM FISHEL
- TESORO REFINERY
- UNION PACIFIC RAILROAD



ENROLLMENT INSTRUCTIONS

Please return the following pages to enroll:

MAKE SURE TO PRINT CLEARLY

- ✓ PROPOSAL ACKNOWLEDGEMENT & AGREEMENT FORM
- ✓ 2 PAGE SIGNED WRITTEN CANDIDATE APPLICATION
- ✓ 1 PAGE SIGNED PRACTICAL CANDIDATE APPLICATION

SEND via Email, Fax or Post

EMAIL: teri@nationwidecranetraining.com

FAX: 877-429-6287

MAILING ADDRESS:

NATIONWIDE CRANE TRAINING c/o Teri Drapeau – Test Site Coordinator 5650 Madras Street Washoe Valley, Nevada 89704

***All applications must include payment or will be considered incomplete and will not be processed.

Applications are received on a first come first served basis with limited seating of 5 candidates allowed.

If you have enrolled but are unable to attend, please submit a letter on company letterhead to your Test Site Coordinator with an explanation within 10 days of the exam date. You have up to one year to reschedule your exam, at which time a \$25 fee will be due. If you do not reschedule within 12 months, all exam fees will be forfeited. If you decide you no longer wish to take the test, no refunds will be granted. If you have any questions please call your Nationwide Crane Training specialist at (877) 628-2726.

"We hope you find this class a rewarding experience and wish you the best of luck in your efforts."



PROPOSAL ACKNOWLEDGEMENT & AGREEMENT FORM

{ 1 } I,	repres	senting		······································
	{Name}		{Company}	
{2} I / we agree will not be sult (rules of the N candidates all whom the training guidelines, OS certification punderstand the signing this prolicy". I / we	te to pay 100% of the propose to pay 100% of the propose omitted until balance is paid (CCCO). Special payment at fees are non-refundable. [4] ining is being provided for its SHA Regulations, ASME States are said the physical requiat we will be charged an addroposal you agree to the term	sed class fees up from full and not be trangements can be Myself as an industry employees, attestandards, and any chirements and subditional \$500 for a many of this proposal. Nationwide Cran	eyond to secure desire eyond 30 days or pro- be arranged {3} Sin ividual candidate, of st that I /we current other Federal, State estance abuse testing any Instructor Class I and have read our ne Training for any	s of this agreement stated below. ed class date. Practical Score Sheets acticals will become null and void ace each class is based on only 5 or I representing the company as to ally do and will adhere to all NCCCO and local laws regarding the g of crane operators. {5} I / we seroom Manual not returned. {6}By "Guarantees and Disclaimer errors and omissions in the training,
NAME ON CIVE	- Reservant			/Payable Date:
NAME ON CREI	OIT CARD:			
BILLING ADDR	ESS:			
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EMAIL ADDRES	SS:	CELL	PHONE FOR EMERGE	ENCIES:
BACKUP CONT	ACT NAME:		PHONE NUMBER:	
SHIPPING ADDI	RESS for NCCCO Cards:			
	ANDIDATES ENROLLING:			
EXAMS TAKING	G: (please circle which exam and how	w many) CORE	TSS TLL Q	PRS
PLEASE MAKE	PAYMENT TO: NATIONWIDE CI	RANE TRAINING (ta	x ID 82-5491749)	

PLEASE FAX OR EMAIL ALL PAPERWORK TO: teri@nationwidecranetraining.com FAX: 877-429-6287



Candidate Application

WRITTEN EXAMINATION—MOBILE, TOWER & OVERHEAD CRANE OPERATOR (PAPER/PENCIL TESTS ONLY)

Please type or print neatly. All fields marked with an asterisk (*) must be completed or application will be considered incomplete. 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) STATE* ZIP* COUNTRY PERSONAL MAILING ADDRESS* CITY* **USA** CANDIDATE EMAIL* (PERSONAL EMAIL UNIQUE TO CANDIDATE) HOME PHONE **CELL PHONE*** COMPANY/ORGANIZATION PHONE COMPANY MAILING ADDRESS CITY STATE COUNTRY USA ☐ 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(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 \boxdot 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.

WRITTEN EXAMS*

★ Mobile Core Exam	652603	LOAD CHARTS (Check one for each Specialty Exam)
Lattice Boom Crawle (LBC)		☐ Terex/American ☐ Manitowoc
O Lattice Boom Truck (LBT)	652609 652610	☐ Link-Belt ☐ Manitowoc
○ Telescopic Boom— Swing Cab (TLL)	652612 652613 652618	Grove (Truck Mount) Link-Belt (Rough Terrain) National (Boom Truck)
○ Telescopic Boom— Fixed Cab (TSS)	652616 652660	Manitex (Boom Truck) Shuttlelift (Carry Deck)
O Tower Crane	654601	
O Overhead Crane	653601	

WRITTEN EXAM/RETEST FEES

Core Exa	ım	\$160
O Core Exa	m plus one Specialty Exam	\$180
O Core Exa	m plus two Specialty Exams	\$200
O Core Exa	m plus three Specialty Exams	\$220
O Core Exa	m plus four Specialty Exams	\$240
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CANDIDATE APPLICATION (CONT'D)

WRITTEN EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION

TEST SITE NAME	TEST SITE COORDINATOR NAME*
NCT-Carlson BTCP	Teri Drapeau
TEST SITE ADDRESS	
2661 NE 46th Ave (Des Moines Welding Bldg)	
CITY	STATE ZIP COUNTRY USA
Des Moines	10wa 30317
TEST ADMINISTRATION NUMBER*	TEST DATE*
I declare that the foregoing statements and those in any requestand and agree that my failure to provide accurate and comprocedures, including the Code of Ethics, shall constitute growth revocation of my certification. I understand that NCCCO restion or in connection with my certification. I expressly conse NCCCO's Information Release policy. I have read the NCCC NCCCO policies and procedures—including NCCCO's substitute, including without limitation those posted at ncccook tion period I fail to meet any of the requirements outlined all continue to fulfill certification requirements, I must report it any subsequent investigation regarding such matters.	inplete information or abide by NCCCO's policies and bunds for the rejection of my application, or denial or serves the right to verify any information in this applicant to NCCCO's release of any information consistent with CO Candidate Handbook and agree to be bound by all tance abuse policy—as they may be amended from time org. I understand that if at any point during my certificatione, or if matters arise that can affect my capability to to NCCCO immediately and agree to cooperate with
CANDIDATE SIGNATURE	DATE*
METHOD OF PAYMENT FOR CANDIDATE EXAMINATION	FEES Do not send cash.

VISA	MasterCard	AMERICAN	onal check losed	☐ Employer check enclosed	☐ Money Order enclosed	Please do not staple your check or money order.
If paying by credi	it card, complete	the following infor	mation:			
CREDIT CARD NUMBER	$N \mid A \mid T \mid I$	ONWID) E	CRANE	EXPIRATION DATE	
NAME (Print as it appears o	n card)	SIGNATURE On File	. ,		SECURITY CODE	
					(Three- or four-digit	code located on the card.
If using company	credit card, prov	ide company nam	e: Nation	nwide Crane Trair	ning	
Email credit card	receipt to: teri@	nationwidecra	netrainin	g.com		

Checks and money orders should be payable to: Nationwide Crane Training

Please contact your Test Site Coordinator for instructions on where to submit written exam applications. If instructed to submit directly to NCCCO, please send application and payment to:

Nationwide Crane Training 5650 Madras St., Washoe Valley, NV 89704

Ofc: 877-628-2726 Fax: 877-429-6287

Email: teri@nationwidecranetraining.com



Candidate Application

PRACTICAL EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

AS shown on driver's license) CO CERTIFICATION NUMBER (if previously certified) DATE OF BIRTH* CANDIDATE ID: (if previously tested) PERSONAL MAILING ADDRESS* CITY* STATE* ZIP* COUNTRY USA HOME PHONE COMPANY/ORGANIZATION PHONE COMPANY/ORGANIZATION PHONE COMPANY MAILING ADDRESS CITY STATE ZIP COUNTRY USA COUNTRY USA COUNTRY USA NDICATE WITH A CHECK THE CRANE TYPE(S) YOU WISH TO BE TESTED ON*: D Lattice Boom Crane	DATE OF BIRTH* CO CERTIFICATION NUMBER (if previously certified) DATE OF BIRTH* DELIVERY OF BIRTH* DATE OF BIRTH*	CANDIDATE ID: (if previously tested) STATE* CANDIDATE EMAIL* (PERSONAL EMAIL U PHONE STATE ZIP* PHONE ZIP WISH TO BE TESTED ON*: g on a boom truck? Yes No on a boom truck? Yes No ACTICAL EXAMINATION PE SITE #:* 56	USA NIQUE TO CANDIDATE) COUNTRY
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Those B77-628-2726 EST SITE ADDRESS 2.661 NE 46th Ave Des Moines 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 my certification. I expressly consent to NCCCO's release of any information consistent with NCCCO's Information Release policy. I have read the NCCCO Candidate Handbook and agree to be bound by all NCCCO policies and procedures—including NCCCO's substance abuse policy—as they may be amended from time to time, including without limitation those posted at nccco.org. I further attest that I am physically and mentally capable of safely operating equipment and/operforming the tasks described in the Candidate Handbook on the day of the Practical Exam. I understand and agree that any personal injury and/or property damage resulting from or caused in any way by my participation in the CCO Practical Exam.	HONE B77-628-2726		550
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Des Moines STATE ZIP COUNTRY USA Iowa 50317 USA Ideclare 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 my certification. I expressly consent to NCCCO's release of any information consistent with NCCCO's Information Relead policy. I have read the NCCCO Candidate Handbook and agree to be bound by all NCCCO policies and procedures—including NCCCO's substance abuse policy—as they may be amended from time to time, including without limitation those posted at nccco.org. I further attest that I am physically and mentally capable of safely operating equipment and/operforming the tasks described in the Candidate Handbook on the day of the Practical Exam. I understand and agree thany personal injury and/or property damage resulting from or caused in any way by my participation in the CCO Practical Exam.		teri@nationwidecranetrain	ing.com
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$to\ fulfill\ certification\ requirements,\ I\ must\ report\ it\ to\ NCCCO\ immediately\ and\ agree\ to\ cooperate\ with\ any\ subsequent$	to fulfill certification requirements, I must report it to NCC investigation regarding such matters.	CCO immediately and agree to coope	erate with any subsequent

CANDIDATE SIGNATURE*

DATE*

Des Moines Airport & Directions

Des Moines International Airport: 5800 Fleur Drive, Des Moines, IA 7.9 mi S / (515) 256-5050

Directions from Des Moines International Airport (24 min 12.3 miles)-Take Cowles Dr to Fleur Dr (3 min (0.5 mi) Continue on Fleur Dr.

Take I-235 E to NE 46th Ave (21 min (11.9 mi)

NCT/Carlson: 2661 NE 46th Ave., Des Moines, IA 50317

Nearby Hotels to NCT Des Moines

Motel 6 Des Moines North 4940 NE 14th St, Des Moines, IA 50313 (515) 266-5456 approximately \$49 per night

Super 8 Des Moines 4685 A Northeast 14th Street, Des Moines, IA 50313 (515) 216-3645 approximately \$56 per night

Baymont Inn & Suites Des Moines North (*This is the most popular of our customers) 4685 NE 14th St, Des Moines, IA 50313 (515) 650-1269 approximately \$69 per night

Quality Inn 4950 NE 14th St, Des Moines, IA 50313 (515) 266-6800 apx \$71 per night

Click here for Google's List of Hotels

***Nationwide Crane Training does not endorse any of these hotels.

This is simply a courtesy list of local hotels for your personal accommodations. You are responsible for making your own reservations.