

# 广东省特种设备行业协会文件

粤特协[2023]30号

## 关于举办 EN ISO9712 无损检测 UT（超声波）Level 2 人员资质 鉴定与认证培训班的通知

相关单位、人员：

EN ISO9712 是欧盟对无损检测人员的强制资质认可标准，拥有 EN ISO 9712 认可的无损探伤 (NDT) 人员是获得许多欧盟强制认证的必要条件，包括承压设备 (PED) 和建筑钢结构 CE (EN1090) 认证，国际焊接质量体系认证 ISO 3834，铁路焊接体系 EN15085 认证等所需要的条件之一，同时也是欧美跨国采购项目中对制造商的常见人员资质要求。

为满足众多企业的需求，广东省特种设备行业协会与欧盟无损检测委员会认可的焊接和无损检测认证人员认证机构 PRVAZ 达成合作共识，开展 EN ISO9712 的无损检人员 UT（超声波）Level2

资质鉴定与认证工作，NDT PRVAZ 是欧盟斯洛伐克认证委员会 SSNDT 根据 ISO/IEC 17024 授权的欧洲无损检测人员培训和焊接人员培训机构，PZ 机构位于首都 Bratislava，具备 ISO/IEC-17021, ISO/IEC-17025, ISO/IEC-17065 等国际性资质认证及欧盟 CE 认证的机构。

## 一、报考资格

(一) 已取得国内其它认可行业考委会颁发的 I 级证书者，可以报考同方法的 II 级，报考 II 级时应提交 I 级同类资格证书原件或扫描件；

(二) 直接报考 2 级资格人员应提交大专（理工科）以上学历证书原件或扫描件，并具有相应实践工作经历。报考不同的方法等级所需的工作经历如下：

方法 NDT method	等级 Level	工作经历（月） Experience	备注 Note
UT(超声波)	Level 2	6months	--

(三) 人员的视力检测必须符合 EN ISO9712 要求，每年至少进行一次视力测试，单眼或双眼校正视力要求不低于耶格视力表中的 J1 或罗马数字 N4.5。

(四) 凡色盲者及矫正后近距离视力不达标者不能参加培训认证。

## 二、考核内容

(一) 所报考 NDT 方法基础知识及专业知识；

## 1、认证服务费:

UT level 2: 8000 元/人, 如需增加 PED 认证, 增加费用 500 元/人。

(以上费用包括培训费, 考试费, 证书费, 材料费)

## 2、汇款帐户信息

帐户名称: 上海沃证机电技术服务有限公司

开户行: 中国民生银行上海市北支行

帐 号: 0204014170014677

### (二) 食宿统一安排, 费用自理

培训服务费(即食宿费): 250 元双住每天(含自助餐或围餐早午晚); 355 元单住每天(含自助餐早午晚), 如有需要请自行联系佛山市质安职业资格培训中心办理(该中心主要以刷卡形式收取该项费用, 不建议汇款和现金支付)。

食宿联系人: 叶先生                      联系电话: 0757- 83691990

## 五、培训地点与时间

### (一) 培训报到时间:

UTII 培训时间: 2023 年 7 月 18 日至 23 日。

UTII 报到时间: 2023 年 7 月 17 日 16:30-17:30

(二)考核地点: 广东省佛山市南海区狮山镇科技西路 2 号, 佛山市质安职业资格培训中心。

## 六、其他

### (一) 培训班联系人

(二) 检测工艺方法及工业规程的编制:

(三) 相应标准的实践操作考试;

注: 以上内容均为中英文双语。

### 三、报考需提供材料

(一) Application Form for qualification exam and certification OF person IN NDT: 《无损检测人员等级资格认证申请表 T84-COPZ-2007-6 EN》(附件一), 按照要求逐项填写, 并由雇主签字或盖章(原件及扫描件), 工作经历栏上需要有 II 级或 III 级人员签字证明;

(二) Acknowledgement FOR survey OF Visual Ability: 《人员视力检查证明: T55-COPZ-2005-4 EN》(附件二); 由企业雇主确认后盖章;

(三) AGREEMENT FOR THE USE OF THE CERTIFICATE: 《认证人员行为准则: T52A-COPZ-2005-3 EN》(附件三), 报考人员本人签字拼音+中文;

(四) 学员需提供身份证扫描件(正反两面); 学历证书扫描件; 个人电子证件照(1寸), 同类资质或者同行业资质证书扫描件(如有);

(五) 以上资料请认真填写, 确信无误后于 7 月 17 日前将资料的扫描件信息发邮件到 irene@via-cert.com。纸质材料在 7 月 17 日报到时交给现场工作人员。

### 四、相关费用

(一) 认证费用

裴老师：13392217586 、马老师：18028158812

冯老师：19925655842

（二）凡参加该班的学员，请自行加入微信群，该群名称EN IS09712UTII，理论、实操考试安排，临时通知等都通过这个群公布，该群只允许本班学员加入。



附件：

1. 《无损检测人员等级资格认证申请表 T84-COPZ-2007-6 EN》
2. 《人员视力检查证明： T55-COPZ-2005-4 EN》
3. 《认证人员行为准则： T52A-COPZ-2005-3 EN》
4. 交通说明



主题词：鉴定 认证 培训 通知

广东省特种设备行业协会秘书处 2023年6月13日印发





# PRVÁ ZVÁRAČSKÁ, a. s.

Kopčianska 14, 851 01 Bratislava 5

Certification Body for certification of welding and NDT persons

T05-COPZ-2020-2

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## APPLICATION FOR ISSUE OF NDT CERTIFICATE

### a) Personal data

Title, name and surname: Yanming Liang

Birth date: October 25, 1982

Birth place: Changsha City, Hunan province

Home address: NO.32, Jianxi Village, Xianfa Town, Changsha City, Hunan Province ZIP: 41006

Telephone: +861356076xxxx

Email: yangmingliang123@126.com

Educational attainment: Hunan Industrial Vocational and technical school

### b) Employer data

Name: Huannang XXXXX Machinery Equipment-Manufacturing Co., Ltd

Address: Xinfa Industry Park Lang Xi County XuanCheng City ZIP: 410006

Telephone: 0731- 89671231

Email: 1234567@qq.com

### c) Required NDT certification according to STN EN ISO 9712 and certification scheme CS-21-NDT, data on acquired practice <sup>3)</sup>

Method	Level			Sector <sup>1)</sup>								PED <sup>2)</sup>	Certification type <sup>2)</sup>				Practice <sup>3)</sup> (in months)		
	1	2	3	w	c	f	wp	t	B	C	D		CE	PR	RE	RK	0 <sup>4)</sup>	1 <sup>5)</sup>	2 <sup>5)</sup>
ET	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
LT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
MT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
PT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
RT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			22	
RT-FAS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
UT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
UT-T	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
VT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
VT-ThP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Practice <sup>3)</sup> carried out under the supervision of:

Manager, Wenjun DUAN

Title, name, surname, certificate No., method, level

### Brief characteristics of the performed works (types of tested products, used equipment and others)

Since joined XXXXXX 公司英文名称, I have taken part in many projects inspection, supervised many equipment, including steel structure, welding process, etc.

By signing, I confirm the veracity of the data on the said practice.

In Changsha city on 25.8.2022

place

date

Name, function and employer signature or the third independent side

#### <sup>1)</sup> Product sectors

w - Welds (all types of welds, including soldering, for ferrous and non-ferrous materials)  
c - Castings (ferrous and non-ferrous materials)  
f - Forgings (all types of forgings: ferrous and non-ferrous materials)  
wp - Wrought products (except forgings, for example plates, rods)  
t - Tubes and pipes (seamless, welded, ferrous and non-ferrous materials, including flat products for the manufacture of welded pipes)

#### Industrial sectors

B - Production and manufacturing of materials (include sectors w, c, f, wp, t)  
C - Production equipment and industrial production (include sectors w, c, f, wp, t)  
D - Pre and in-service testing of equipment, industrial units and constructions (include sectors w, c, f, wp, t)

#### <sup>2)</sup> CE - certification

PR - prolongation after 5 years  
RE - recertification after 10 years  
RQ - requalification

#### <sup>3)</sup> Industrial practice required for

<sup>4)</sup> 0 - practice before the degree 1, 2 or 3  
<sup>5)</sup> experience gained at the degree 1 or 2  
<sup>7)</sup> mark the required with a cross

<sup>\*\*)</sup> I request the approval of personnel for the NDT control of non-detachable welded joints of pressure equipment pursuant to Directive 2014/68/EU of the European Parliament and of the Council, respectively NV SR No. 1/2016 Coll., Annex 1, point 3.1.3 on making pressure equipment available on the market and to issue of NDT certificate for chosen NDT method.



# PRVÁ ZVÁRAČSKÁ, a. s.

Kopčianska 14, 851 01 Bratislava 5

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## d) Participation in educational events (trainings, seminars) and conferences:

(name of the event, date / scope of the proceedings; participation as a listener; participation as a lecturer - title and scope; participation as an examiner)

n.a

e)  I request for issuing of identification card <sup>1)</sup> (ID card) - the ID card provides access to the Qualified Person's Account, which provides an overview of the qualifications acquired by COPZ applicants.

## f) Personal data security

COPZ processes, maintains and archives the personal data contained in this application in accordance with Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of individuals with regard to the processing of personal data and on the free movement of such data and the Act No. 18/2018 Coll. on the protection of personal data as an operator, in order issue the certificate and to fulfill the obligations arising from international ISO standards in the COPZ database. The applicant's consent is given for an indefinite period of time and is revocable under the aforementioned Act, subject to compliance with the requirements of the accreditation standard EN ISO/IEC 17024, art. 7.1.2.

I hereby certify that I will comply with the agreement (T52-COPZ) and agree to the processing of my personal data under f) and the photo. I am aware that, in justified cases, I have the right to request adaptation to my personal needs in the trial and qualification process:

N/A

1).

I disagree that COPZ used in qualification process, examination and conformity assessment subcontractors <sup>\*)</sup>.

I declare that no complaint has been lodged against me and a valid certification and that certification can be granted to me <sup>\*)</sup>.

In Xuancheng city on 10.8.2022  
place date Applicant signature

## g) Attachments

- confirmation of completion of the training for first certification,
- copy of the document of the highest completed education for first certification,
- scanned original of a visual ability or a copy confirmed by the employer (T55-COPZ form or other proof meeting the requirements of STN EN ISO 9712, Chapter 7.4),
- 2x Agreement for the use of the certificate between COPZ and certified person (form T52-COPZ),
- 1x digital or paper photo – in case you are applying for an identification card (point e) ),
- copy of the NDT certificate in the required method (if exist) and a certificate of the basic exam (only for candidates of 3 degrees).

## h) Fulfilment of certification requirements (filled by COPZ)

Žiadosť bola prijatá dňa: .....

Na základe preskúmania žiadosti je / nie je <sup>2)</sup> žiadateľ pripustený ku skúške. COPZ je schopný splniť požiadavky žiadateľa.

Dňa: ..... Plnenie potvrdil certifikačný pracovník: Eva Herczegová  
podpis

### Potvrdenia o zrakovom vyšetrení podľa STN EN ISO 9712, kap. 7.4

Dátum zrakového vyšetrenia: ..... Výsledné hodnotenie zraku: vyhovujúce / nevyhovujúce <sup>2)</sup>  
s korekciou / bez korekcie <sup>2)</sup>

Dátum preverenia: ..... Preveril certifikačný pracovník: Eva Herczegová  
podpis

Po preskúmaní predložených dokumentov potvrdzujem, že žiadateľ splnil / nesplnil <sup>2)</sup> všetky predpísané podmienky na vydanie certifikátu.

Dátum: ..... Certifikačný pracovník: Eva Herczegová  
podpis

Vedúci COPZ na základe protokolu o skúške, kontroly plnenia predpísaných podmienok a výsledkov z certifikačnej skúšky rozhodol o vydaní / nevydaní <sup>2)</sup> certifikátu.

Dátum: .....  
podpis vedúceho COPZ za notifikovanú osobu č. 2408 <sup>3)</sup>

Certifikát číslo: ..... odoslaný dňa: .....  
Eva Herczegová  
podpis certifikačného pracovníka

<sup>1)</sup> e. g.: interpreter, test in foreign language etc.

<sup>2)</sup> delete what is inappropriate/nehodiace sa prečiarknite

<sup>3)</sup> mark required

<sup>3)</sup> V prípade, že žiadateľ požaduje schválenie podľa \*\*), rozhodnutie o vydaní certifikátu podpisuje spolu s vedúcim COPZ i osoba poverená konať za Notifikovanú osobu č. 2408.



# POTVRDENIE O VYŠETRENÍ ZRAKOVÝCH SCHOPNOSTÍ

## ACKNOWLEDGEMENT FOR SURVEY OF VISUAL ABILITY

Toto potvrdenie sa vydáva ako doklad pre PRVÚ ZVÁRAČSKÚ, a. s.  
*This acknowledgement is issued as a document for PRVÚ ZVÁRAČSKÚ, a. s.*  
Certifikačný orgán pre certifikáciu osôb vo zváraní a NDT/  
*Certification body for certification of person at welding and NDT*

### ÚDAJE O OSOBE:

#### PERSONAL INFORMATION:

Titul, priezvisko: <i>Title, Surname:</i>	Liang	Meno: <i>Name</i>	Yanning
Dátum narodenia: <i>Date of Birth:</i>	October 25, 1982	Miesto nar.: <i>Place of birth:</i>	Changsha
Adresa bydliska: <i>Residential Address:</i>	NO.32, Jianxi Village, Xianfa Town, Changsha City, Hunan Province		
PSČ: <i>Postcode:</i>	410000	Mesto: <i>City:</i>	Changsha

Menovaná osoba požaduje vyšetrenie zrakovej schopnosti z hľadiska jej spôsobilosti podľa STN EN ISO 9712 vykonávať práce v nedeštruktívnom testovaní z nasledujúcimi požiadavkami:  
*Above named person requests examination of visual ability in terms of its eligibility according to STN EN ISO 9712 to carry out work in non-destructive testing of the following requirements:*

#### 1. Videnie na blízko/ *Close vision*

Schopnosť videnia na blízko musí byť dostatočná na prečítanie Jägerovho testu č. 1 alebo textu písaného písmom Times Roman N 4,5 alebo ekvivalentným písmom (výška: 1,6 mm) zo vzdialenosti nie menšej ako 30 cm aspoň jedným okom s optickou pomôckou alebo bez optickej pomôcky.

*The ability of close vision must be sufficient to read Jager test no. 1 and a text written in Times Roman N 4,5 or equivalent letters (height: 1.6 mm) at a distance not smaller than 30 cm, at least one eye with an optical device or without an optical device.*

#### 2. Dostatočné farebné videnie/ kontrastné videnie/ *Adequate colour vision / contrast vision*

Uchádzač musí mať také farebné videnie, aby dokázal rozpoznať a rozlíšiť kontrasty medzi farbami alebo odtieňmi sivej (napr. Ishihara test).

*The candidate must also have color vision that can detect and distinguish contrasts between colors or shades of gray (eg. Ishihara test).*

#### 3. Videnie do diaľky (LEN personál pre skúšanie vizuálnymi metódami)/ *Seeing into the distance (only personnel for visual testing)*

(vzdialenosť > 4 m)

*(distance > 4m)*

pomocou Landoltových krúžkov  
*with Landolt crosslet*

dosiahnuté aspoň jedným okom  
*at least one eye*

hodnota  $\geq 0,63$

*value  $\geq 0,63$*

iným spôsobom

*other methods*

Optická pomôcka:

*Optical/ device*

potrebná

*necessary*

nie je potrebná

*unnecessary*



Očný lekár alebo iná lekársky uznaná osoba/ Eye doctor or other medically recognized person: .....

需要盖公司公章

Miesto, datum  
*Place, date*

Meno, podpis a pečiatka  
*Name, signature and stamp*

Upozornenie/ *Warning*:

- Minimálne požiadavky na zrakovú spôsobilosť musia byť preukázané pred kvalifikačnou skúškou (vid' bod 7.4 EN ISO 9712).  
*Minimum requirements for visual capability must be established before the qualifying examination (see point 7.4 of EN ISO 9712).*
- Pre personál certifikovaný podľa EN ISO 9712 platí: skúšky zrakovej ostrosti sa musia vykonávať raz ročne a overovať zamestnávateľom. Na požiadanie certifikačného orgánu ho treba predložiť (vid' bod 7.4 EN ISO 9712).  
*Personnel certified according to EN ISO 9712 is: visual acuity tests must be carried out once a year and verified by the employer. On request of the certification authority, it must be provided (see point 7.4 of EN ISO 9712).*
- K bodu 3: Personál, ktorý vykonáva alebo hodnotí vizuálne skúšky, musí dodatočne spĺňať požiadavky na zrakovú spôsobilosť podľa EN 13018, bod 7c.
- *To point 3: Personnel who carry out or evaluate visual tests must additionally meet the visual ability to EN 13018, point 7c.*



**PRVÁ ZVÁRAČSKÁ, a. s.**

Kopčianska 14, 851 01 Bratislava 5

**Certification body certifying persons in welding and NDT**

T52-COPZ-2020-1\_en

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## AGREEMENT FOR THE USE OF THE CERTIFICATE

**Certification body for certification of person at welding and NDT (hereinafter COPZ)**

and

holder of Certificate Yanming liang (梁炎明) certificate No. \_\_\_\_\_  
Title, name, surname

### Preamble:

Certification body and certified person sign this agreement, which provides needs and responsibilities of both partners in accordance to STN EN ISO/IEC 17024 and according to the certification scheme. Certified person is signing this agreement to comply with conditions, under which the certificate was received. Certification body complies to keep constant contact with the certified person, which fulfils given conditions for audit and recertification.

### Within this agreement:

*certificated person is **committed** to:*

- during validity of the certificate comply with the rules of current certification scheme,
- refer to the certification only in accordance to the area of received certification,
- do not use the certification in such way, which can harm the reputation of certification body and do not make such announcements, which can certification body consider as misleading or inappropriate
- after the validity or after the cancellation of certification, stop using all documents which includes references to the certification body or state of certificate and return received certificate,
- immediately inform the certification body about any change in address or employer,
- provide the requested information about activity (T53-COPZ) to the certification body every year,
- establish and keep personal record of complaints and objections against activities which are related to of the use of the certificate.

*certification body is **committed** to:*

- inform certified person about changes in the certification scheme, regulations and standards related to the use of certificate,
- request the information from certified person about activity (T53-COPZ),
- at least once a year organize specialized seminar or conference,
- extend the validity of the certificate, if certified person meets the conditions of this agreement and certification scheme and requests to extend the validity of certificate.

### Final statement:

If certified person during the validity of the certificate stops to communicate with the certification body, the certificate will be cancelled and certification body informs about this case. Repeated certification is possible only after submitting of new application and fulfill the certification conditions.

This agreement is created in two prints. The original of this agreement is owned by certified person and the copy of agreement is owned by certification body. This agreement is available free for all on website [www.pzvar.sk](http://www.pzvar.sk).

In Foshan on 08.08.2022 In Bratislava on \_\_\_\_\_

Yanming liang (梁炎明)

certified person

Ing. Eva Gubóová

Head of certification body



## 附件四：

### 交通说明

地址：广东省佛山市南海区狮山镇科技西路2号

总机：0757-88376400

自驾车导航：佛山市质安职业资格培训中心

1. 白云机场：机场快线——狮山华美达酒店

到达后滴滴车 8 元左右；

2. 佛山西站：建议滴滴车 15 元左右；

3. 广佛肇轻轨站：建议滴滴车 10 元左右；

市内各车站到质安培训中心的线路：

4. 火车站：（佛山总站）到质安培训中心 16 公里

乘坐 K5 到狮山广场后滴滴车 10 元左右；

5. 汽车总站：（汾江中路）到质安培训中心约 18 公里

汽车站 B 站乘坐禅城—三水城巴到塘头社区居委下车后往前行 1 公里；

汽车站 A 站乘坐 K5 路到狮山镇政府站下车后滴滴车大概 10 元左右。



