# Application for Approved Measurement and Verification Professionals

Version 2.0 – 11 December 2018

The Victorian Energy Efficiency Target (Project-Based Activities) Regulations 2017 (the PBA Regulations) require approved measurement and verification professionals (AM&VPs) to confirm the validity of energy models and measurement and verification (M&V) parameters used by accredited persons (APs) when implementing project-based activities (PBA).

The Essential Services Commission assesses AM&VP applications against the requirements of the PBA Regulations.

This form should be used to apply to the commission to become an AM&VP.

Please read the **Guide for Approved Measurement and Verification Professionals** available at [www.esc.vic.gov.au/m-and-v](http://www.esc.vic.gov.au/m-and-v) for further information on the application process.

If approved, AM&VPs are listed on the Register of Approved M&V Professionals at [www.veu-registry.vic.gov.au/register-measurement-verification-professionals](http://www.veu-registry.vic.gov.au/register-measurement-verification-professionals)

Responses should reference published standards and guides where relevant, e.g. International Performance Measurement and Verification Protocol (IPMVP), Efficiency Valuation Organisation 2016; HVAC applications in Chapter 41 (Building energy monitoring) in the American Society for Heating, Refrigerating and Air-Conditioning Engineers handbook: fundamentals, American Society for Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) 2011; or the ISO 50015:2014 Standard, International Organization for Standardisation 2014.

The completed Application for Approved Measurement & Verification Professionals form and any supporting information should be emailed to [amvp@esc.vic.gov.au](mailto:AMVP@esc.vic.gov.au)

1. Applicant details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Applicant details | | | | |
| **Q1.** Name: | Click here to enter text. | | | |
| **Q2.** Job title: | Click here to enter text. | | | |
| **Q3.** Organisation: | Click here to enter text. | | | |
| **Q4.** Postal address: | Click here to enter text. | | | |
| **Q5.** ABN: | Click here to enter text. | | **Q6.** Phone number: | Enter text. |
| **Q7.** Email | | Click here to enter text. | | |

1. Training and experience

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Qualifications and training | | | | | | | | | | | |
| **Q8.** List your relevant tertiary academic qualifications from a university or equivalent institution of higher learning (e.g. engineering, mathematics or statistics degree): | | | | | | | | | | | |
| Qualification | | | Year awarded | | | | | | Name of institution | | |
| Click here to enter text. | | | Click here to enter text. | | | | | | Click here to enter text. | | |
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| Click here to enter text. | | | Click here to enter text. | | | | | | Click here to enter text. | | |
| **Q9.** List your relevant professional certifications or relevant standard accreditations (e.g. CMVP, CEES, CEEL, CEM, NGERS, RABQSA, ICAA, JAS-ANZ) | | | | | | | | | | | |
| Professional certification | | | | | | | | | Date certified | | |
| Click here to enter text. | | | | | | | | | Click here to enter text. | | |
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| Click here to enter text. | | | | | | | | | Click here to enter text. | | |
| Note: We require AM&VPs to hold certified measurement and verification (CMVP) accreditation. While other accreditations are evidence of useful project skills, they do not replace CMVP accreditation.  **Q10.** List training or programs attended relevant to the VEU program in Victoria and/or the Energy Saver Scheme (ESS) in NSW. | | | | | | | | | | | |
| Training/program | | | | | | | | | Date attended | | |
| Click here to enter text. | | | | | | | | | Click here to enter text. | | |
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| Click here to enter text. | | | | | | | | | Click here to enter text. | | |
| Click here to enter text. | | | | | | | | | Click here to enter text. | | |
| **Q11**. Have you previously been approved under the Energy Saver Scheme, administered by IPART, as an approved M&V professional or PIAM&V auditor?  If so, you must attach a letter of consent for IPART to disclose information requested by the commission relating to your involvement with ESS to the commission (a Template Letter of Consent to Release Information is found at [www.esc.vic.gov.au/m-and-v](http://www.esc.vic.gov.au/m-and-v)) | | | | | | | | | | | |
| ESS approved M&V professional | | | | |  | | ESS PIAM&V auditor | | | |  |
| No | | | | |  | |  | | | |  |
| **Experience** | | | | | | | | | | | |
| **Q12.** Please list relevant previous M&V projects you’ve played a lead role in. Include the project referee’s contact details, a brief summary of the project and the date it was conducted. | | | | | | | | | | | |
| Client company | | Date conducted | | Your role | | | | Project summary | | Referee: name, email & phone number | |
| Enter text. | | Enter text. | | Enter text. | | | | Enter text. | | Enter text. | |
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| Enter text. | | Enter text. | | Enter text. | | | | Enter text. | | Enter text. | |
| **Q13.** Please tick the box below to provide your consent for us to contact the referees listed in your CV, professional certifications and/or project log. | | | | | | | | | | | |
| **I confirm that the commission may contact the employers, programs or clients provided by me to obtain information on my performance. I understand that any information obtained may form part of the AM&VP assessment.** | | | | | | | | | | |  |
| **Best practice measurement & verification techniques** | | | | | | | | | | | |
| **Q14**. Select the energy models you can demonstrate your understanding of | | | | | | | | | | | |
| Regression analysis | | | | | |  | Estimate of the mean | | | |  |
| **Q15.** Describe your skills, experience and qualifications in regression analysis (if relevant) | | | | | | | | | | | |
|  | Provide a ***statement*** describing skills, experience and qualifications in regression analysis. | | | | | | | | | | |
| **Q16.** Describe your skills, experience and qualifications in estimating the mean (if relevant) | | | | | | | | | | | |
|  | Provide a ***statement*** describing skills, experience and qualifications in estimating the mean. | | | | | | | | | | |
| **Q17**. Select the relevant types of equipment that you can demonstrate an understanding of  how it converts energy into services | | | | | | | | | | | |
| Boiler, steam and hot water applications | | | | | | | | | | |  |
| Commercial refrigeration | | | | | | | | | | |  |
| Industrial refrigeration | | | | | | | | | | |  |
| Compressed air | | | | | | | | | | |  |
| Motor, pump and fan applications | | | | | | | | | | |  |
| Cogeneration / tri-generation | | | | | | | | | | |  |
| Commercial heating, ventilation and air conditioning (HVAC) | | | | | | | | | | |  |
| Industrial heating, ventilation and cooling | | | | | | | | | | |  |
| Lighting | | | | | | | | | | |  |
| **Other – please list**  *If your relevant type of equipment is not covered by any combination of the above.* | | | | | | | | | | |  |
|  | Provide a ***list*** of relevant types of equipment that you can demonstrate an understanding of how it converts energy into services. | | | | | | | | | | |
| **Q18**.Describe your skills, practical experience and qualifications that demonstrate your understanding of how each of the selected types of equipment converts energy into services, and is affected by the independent variables | | | | | | | | | | | |
|  | Provide a ***statement*** describing your skills, practical experience and qualifications that demonstrate your understanding of how each of the selected types of equipment converts energy into services, and is affected by the independent variables. Please clearly itemise this statement according to each applicable equipment type. | | | | | | | | | | |

1. Previous M&V applications

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Previous applications | | | | | |
| **Q19**. Have you previously been refused approval as an M&V professional in Australia?[[1]](#footnote-1) | | | | | |
| No | |  | | Yes |  |
| If Yes, provide details, including the date | | | | | |
|  | Provide a ***statement*** describing details, including the date. | | | | |
| **Q20**. Have you previously had approval as an M&V professional withdrawn in Australia?[[2]](#footnote-2) | | | | | |
| No | | |  | Yes |  |
| If Yes, provide details, including relevant dates | | | | | |
|  | Provide a ***statement*** describing details, including the date. | | | | |

1. Impartiality and compliance

|  |  |  |
| --- | --- | --- |
| Independent opinion | | |
| **Q21**. Describe the procedures you have in place to ensure you can provide an independent opinion of the validity of the energy models being applied by APs (or attach a document).  *Note that the independence requirements for the AM&VP are different for basic and detailed verification reports. For* ***basic verification reports****, the AM&VP can be employed by AP undertaking the project provided they can demonstrate that there is a sufficient internal process in place to ensure independence from the project. For* ***detailed verification reports****, the AM&VP must be independent from both project and the AP (i.e. they cannot be employed by the AP). Regardless of the type of report, the AM&VP must be independent from the project at all times.* | | |
|  | Provide a ***statement*** describing procedures you have in place to ensure you can provide an independent opinion of the validity of the energy models being applied by APs. | |
| Conflict of interest | | |
| **Q22**.List any conflicts of interest, or potential conflicts of interest, that you have already identified (whether perceived or real) | | |
|  | Provide a ***list*** describing any conflicts of interest, or potential conflicts of interest, that you have already identified (whether perceived or real) | |
| **Q23**.Describe the procedures you have in place to ensure there are no conflicts of interest when working with APs (or attach a document) | | |
|  | Provide a ***statement*** describing procedures you have in place to ensure there are no conflicts of interest, or potential conflicts of interest (whether perceived or real). | |
| **Applicant’s History** | | |
| **Q24**. Please confirm you have completed the questions in Appendix A regarding your history. You must also provide a completed Victorian statutory declaration stating the information you have provided in Appendix A of this form is true and correct. | | Choose an item. |

1. Documents to be supplied

|  |  |  |
| --- | --- | --- |
| Documents to be supplied | | |
| **Required evidence** | **Supporting documentation provided** | **Details (please include file name if applicable)** |
| Copy of current CMVP certificate | Choose an item. | Click here to enter text. |
| Copies of tertiary qualifications and details of how to verify them online | Choose an item. | Click here to enter text. |
| Current CV describing experience in relation to M&V | Choose an item. | Click here to enter text. |
| Additional evidence of M&V experience | Choose an item. | Click here to enter text. |
| Able to perform regression analysis (if relevant) | Choose an item. | Click here to enter text. |
| Able to perform estimate of the mean (if relevant) | Choose an item. | Click here to enter text. |
| Understanding of how each equipment type converts energy to services | Choose an item. | Click here to enter text. |
| Procedures to ensure an independent opinion is provided | Choose an item. | Click here to enter text. |
| Procedures to manage conflict of interest | Choose an item. | Click here to enter text. |
| Statutory declaration stating that all the information provided in Appendix A of this form is true and correct | Choose an item. | Click here to enter text. |
| Letter of consent for IPART to disclose information (if applicable) | Choose an item. | Click here to enter text. |

1. Contact details

|  |  |
| --- | --- |
| **Consent to share contact details** | |
| **Q25**. Please confirm you agree to have your email address (as specified in Section 1 of this form) shared on the Register of Approved M&V Professionals, published on the VEU Registry. |  |
| **Q26**. Please confirm you agree to have your phone number (as specified in Section 1 of this form) shared on the Register of Approved M&V Professionals, published on the VEU Registry. |  |

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1. Declaration

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Declaration** | | | | |
| I declare that:   * The information in this form, its appendices and attachments is correct and not misleading by inclusion or omission. * I consent to the commission checking the information with current and former employers, clients, educational institutions and police. * Upon accreditation approval, I approve the publication of my name/company name, contact details (as specified in Section 6 of this form), approved end user equipment and energy model types, and registration number in the Register of Approved M&V Professionals, published on the VEU Registry at [www.veu-registry.vic.gov.au/register-approved-measurement-verification-professionals](http://www.veu-registry.vic.gov.au/register-approved-measurement-verification-professionals) * I acknowledge that penalties may be applied for providing misleading information under Section 68 of the Victorian Energy Efficiency Target Act 2007. * I will immediately inform the commission if I become aware of any conflict of interest, or potential conflict of interest, which could impact on my role as an independent approved measurement and verification professional. * I will manage and avoid conflicts in my role as an independent approved measurement and verification professional as per the responses and undertakings I have provided in Appendix B of this form. * I will update the commission of any changes to the answers and information provided in Appendix A of this form and the attached Victorian statutory declaration within 28 days of the change occurring. | | | | |
| Click here to enter text.  ……………………………………  Name |  | ……………………………………  Signature |  | DD/MM/YY  ……………………..  Date |
| Click here to enter text.  ……………………………………  Name (witness) |  | ……………………………………  Signature |  | DD/MM/YY  ……………………..  Date |

# Appendix A

Please complete the questions below. You must also provide a Victorian statutory declaration declaring that the answers you have provided in this Appendix are true and correct.

## A1. Compliance in the VEU program

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| * 1. Have you or any of your organisation’s directors, officers or senior managers previously participated in the VEU program? | | Yes | No | |
| * 1. Have you, or any of your organisation’s directors, officers or senior managers, ever had your participation in the VEU program suspended or cancelled, or proposed to be cancelled or suspended? | | Yes | No | |
| * 1. Have you or any of your organisation’s directors, officers or senior managers ever had an application for accreditation or participation in the VEU program refused? | | Yes | No | |
| * 1. If yes to any of these, please provide details | Click here to enter text. | | |

## A2. Compliance in other schemes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| * 1. Have you previously participated in any similar scheme (e.g. another interstate energy efficiency scheme) to the VEU program? | | Yes | No | |
| * 1. Have you, or any of your organisation’s directors, officers or senior managers, ever had your participation in the similar scheme suspended or cancelled, or proposed to be cancelled or suspended? | | Yes | No | |
| * 1. Have you ever had an application for accreditation or participation in the similar scheme refused? | | Yes | No | |
| * 1. If yes to any of these, please provide details | Click here to enter text. | | |

## A3. Disqualification of directors, officers or senior management

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| * 1. Have you, or any of your organisation’s directors, officers or senior managers, ever been disqualified from managing a corporation under the *Corporations Act 2001* (Commonwealth)? | | Yes | No | |
| * 1. If yes, please provide details | Click here to enter text. | | |

## A4. Criminal matters

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| * 1. In the last 10 years, have you, or any of the organisation’s directors, officers or senior managers, been found guilty of an offence against a law of the Commonwealth, a State, a Territory or a foreign country where the offence relates to fraud, dishonesty and/or breach of duty? | | Yes | No | |
| * 1. If yes, please provide details | Click here to enter text. | | |

## A5. Civil matters

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| * 1. In the last 10 years, have you, or any of your organisation’s directors, officers or senior managers, incurred any civil liability for breach of trust or other breach of fiduciary duty, dishonesty, fraud, negligence or recklessness? | | Yes | No | |
| * 1. If yes, please provide details | Click here to enter text. | | |

## A6. Safety

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| * 1. Have you, or any of your organisation’s directors, officers or senior managers, ever been the subject of proceedings for unsafe work practices in any State/Territory or proceedings for an offence against work, health and safety legislation in any State/Territory? | | Yes | No | |
| * 1. If yes, please provide details | Click here to enter text. | | |

## A7. Signature

**Signed by authorised signatory of the applicant**

|  |  |
| --- | --- |
| Signature: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | Click here to enter text. | Date: | DD/MM/YY |

# Appendix B

## Application for approved measurement and verification professional

### Applicant’s undertaking in relation to conflicts including conflicts of interest

These undertakings are given to the Essential Services Commission (the commission) by:

|  |  |
| --- | --- |
| [Name] |  |
| [Address] | ABN (if applicable) |

(the “applicant”)

1. **Any existing conflicts**

|  |  |  |
| --- | --- | --- |
| * 1. At the time of signing this letter, does the applicant have any conflicts, including conflicts of interest, in relation to their proposed work as an approved measurement and verification professional | Yes | No |

If the applicant has answered **yes** under section 1.1 of this letter, they are required to provide details of those conflicts to the commission with this letter in Question 22 of the application form.

1. **Undertakings**
   1. The applicant undertakes to avoid conflicts, including conflicts of interest, in relation to their proposed work as an approved measurement and verification professional
   2. The applicant undertakes to inform the commission as soon as reasonably practicable after they become aware of any conflicts, including conflicts of interest, in relation to their proposed work as an approved measurement and verification professional

Signed for and on behalf of

|  |  |  |
| --- | --- | --- |
| Name |  |  |
| Title |  |
| Company name |  |
|  |  | Signature |
| In the presence of |  |  |
| Witness name |  |  |
|  |
|  |
| Witness name |  | Witness signature |
| Dated: DD/MM/YY |  |  |

1. If a previous application to the commission was refused, you must wait three months from the date of the refusal before re-applying. Refer to the Guide for Approved Measurement and Verification Professionalsfor more information. [↑](#footnote-ref-1)
2. If a previous approval to the commission was withdrawn, you must wait three months from the date of the withdrawal before re-applying. Refer to the Guide for Approved Measurement and Verification Professionalsfor more information. [↑](#footnote-ref-2)