



The Electrical Association of Philadelphia

presents

NFPA 70E

Friday, January 25, 2019

This Course is Required to Create a “Qualified Person”

This is the standard for electrical safety in the workplace. It is different from the NEC NFPA 70 and it is different from OSHA CFR (Code of Federal Regulations).

About the Class: This concise eight-hour course will make the attendee aware of the history of 70E, the types of hazards that exist, hazard analysis, strategies for preventing injuries and protecting the electrician, PPE, Test equipment, High Voltage rules, Energized work permits, and much more will be included in the program.

Who Should Attend: Electrical contractors, project managers, job foremen, plant maintenance personnel, engineers, architects, electricians and HVAC tradespeople. Join in on this class and get your questions answered. Become a leader in the electrical field and in your career.

Date: Friday, January 25, 2019
CEUs: 8 for Philadelphia, NJ, DE, and MD Contractors;
5 for Cecil County, MD; 8 for Queen Anne, MD;
8 for PA Electrical Inspectors
PDHs: 8 for PEs approved by IEEE
Schedule: 7:15 a.m.: Registration – 7:30 a.m. - 4:00 p.m.: Class
Cost: EAP Member Rate: \$250 / Non-Member Rate: \$295
Location: The EAP Office, Blue Bell, PA
Instructor: Rich Van Wert

Required Materials: Bring your own copy of the **2014** NEC book & a calculator
For those who want NJ CEUs – you must bring your photo ID & NJ License

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- Questions? Contact us by phone at (610) 825-1600 or by email at electric@eap.org.
 - To pay by credit card, please register online at www.eap.org or call us at (610) 825-1600. Please note that we **cannot** accept credit card information sent by email or fax.
 - To pay by check, please complete this form and send it in with your check. Make checks payable to: The EAP
 - Payment is required at the time of registration to reserve your seat.
 - **No refunds...see our refund policy at www.eap.org.**
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Registration

To pay by credit card, please visit www.eap.org. To pay by check, please complete this form.

Name: _____

Company: _____

Mobile Phone: _____ Email: _____

Additional Registrant: _____

Additional Registrant: _____

Total Amount Due: \$ _____ Check Number: _____