

GOVERNMENT OF ZAMBIA

STATUTORY INSTRUMENT NO. 59 OF 2021

The Metrology Act, 2017

(Act, No. 6 of 2017)

The Metrology (Certification of Competence) Regulations, 2021

IN EXERCISE of the powers contained in Section 44 and 59 of the Metrology Act, 2017, following Regulations are made:

- | | |
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| 1. These Regulations, may be cited as the Metrology (Certification of Competence) Regulations, 2021. | Title |
| 2. In these regulations, unless the context otherwise requires—
“certificate of competence” means a certificate issued to a person to manufacture, install, repair and service a measuring instrument;
“manufacturer” means a person responsible for the manufacture of a measuring instrument; and
“service technician, fitter or contractor” means a person who is examined and issued with a competence certificate by the Executive Director to install, repair and service a measuring instrument. | Interpretation |
| 3. A person shall not manufacture, repair, install or service a measuring instrument unless that person holds a certificate of competence issued by the Executive Director. | Prohibition of manufacture repair, installation or service of measuring instrument without certificate of competence |
| 4. (1) A person who intends to operate as a manufacturer, service technician, fitter or contractor shall apply to the Executive Director for a certificate of competence in Form I set out in the Schedule. | Application to operate as manufacturer service technician, fitter or contractor |

Copies of this Statutory Instrument can be obtained from the Government Printer, P.O. Box 30136, 10101 Lusaka. Price K36.00 each.

	<p>(2) A manufacturer, service technician, fitter or contractor shall not be issued with a certificate of competence unless that technician filter or contractor is identified with a registered business entity.</p> <p>(3) Subregulation (2) shall not apply to a trainee technician working under the supervision of a certified technician for a period not exceeding six months.</p> <p>(4) An applicant of certificate of competence shall be examined for technical competency to operate as a service technician.</p> <p>(5) The Executive Director shall, on receipt of an application under sub-regulation (1), accept or reject an application and notify the applicant in Form II set out in the Schedule.</p>
Certificate of Competence	<p>5. (1) The Executive Director shall, where the Executive Director accepts an application, issue the applicant with a certificate of competence in Form III set out in the Schedule.</p> <p>(2) The Executive Director shall, in addition to the certificate of competence issue a manufacturer service technician, fitter or contractor with an identification stamp.</p> <p>(3) A certificate of competence is valid for a year.</p>
Duplicate certificate of competence	<p>6. (1) A holder of a certificate of competence whose certificate is destroyed or lost shall apply to the Executive Director for a duplicate certificate of competence in Form IV set out in the Schedule.</p> <p>(2) The Executive Director shall, on receipt of an application under subregulation (1), issue a duplicate certificate of competence in Form V set out in the Schedule.</p>
Renewal of certificate of competence	<p>7. (1) A holder of a certificate of competence shall apply for renewal of certificate of competence in Form VI set out in the Schedule.</p> <p>(2) A certificate of competence shall be renewed annually subject to an assessment procedure as the Executive Director may determine.</p> <p>(3) A certificate of competence that is not renewed shall lapse on expiry.</p>
Display of certificate of competence	<p>8. A holder of a certificate of competence issued under these Regulations shall display the certificate or a certified copy of the certificate in a conspicuous place at the principle place of practice.</p>
Suspension or revocation of certificate of competence	<p>9. The Executive Director shall suspend or revoke a certificate of competence from the holder if that person contravenes the provisions of the Act or any other relevant written law.</p>

Form I
(Regulation 4 (1))SCHEDULE
(Regulations 4, 5, 6, 7, 9 and 10)

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THE ZAMBIA METROLOGY AGENCY
The Metrology Act, 2017
 (Act No. 6 of 2017)

The Metrology (Certification of Competence) Regulations, 2021

APPLICATION FOR ISSUE OF CERTIFICATE OF COMPETENCE

[Please tick] Citizen Applicant Non Citizen Applicant

Category applied for:

Please write in BLOCK LETTERS

1	Personal Information	Please complete
	Surname	
	Forename	
	Maiden Name	
	ID/NRC: Number	
	Passport Number	
	ZMA - CC Number (where applicable)	
	Employee Number (where applicable)	
	Permit Number (where applicable)	
	Date of birth	
	Nationality	
	Sex	
	Postal address	
	Fax	
	Mobile Phone Number(s)	
	E- mail Address	
2	Residential Address	
	House Number	
	Street	
	District	
	Province/State	
	Country	
	Particulars of next of kin	
	Name	
	Relationship	
	Postal address	
	Town	
	Phone Number	
	Fax	
	E-mail Address	

Academic Qualifications

3		Qualification/level	Name of Institution	Examining Body	Year obtained	District, Province/State Country
	Primary					
	Secondary					
	College					
	Universities					
	Other					

If you need more space, write and attach on a separate sheet

EMPLOYMENT STATUS

Employed: **Unemployed:**

	Position / Designation	
	Name of Employer (Organisation or Institution)	
	Current field of practice	
	Postal address	
	Town	
	Phone Number	
	Fax	
	E-mail Address	

FOR INTERNATIONAL (NON-CITIZEN) APPLICANTS, THE FOLLOWING MUST BE SUBMITTED:

1. Academic and professional qualifications
2. Proof of legal entry into the country
3. Professional reference letter(s) from immediate former supervisor(s)
4. Attach recommendation letter from a recognised institution
5. Application forms must be accompanied by an offer of employment

DECLARATION

I.....hereby declare that the information given above is true and correct to the best of my knowledge. Should the information be verified to be false, this application shall be rendered invalid.

Signed: **Date:**
Contact(s) number (Cell).....

Please return the duly completed form including proof of payment of fees to:

Form III
(Regulation 5)



THE ZAMBIA METROLOGY AGENCY

The Metrology Act, 2017
(Act No. 6 of 2017)

The Metrology (Certification of Competence) Regulations, 2021

CERTIFICATE OF COMPETENCE

This is to certify that

.....
has been granted certificate to practice as a
.....
for the period.....to.....

Dated thisday of..... 20.....

Signed :

.....
Executive Director

Form IV
(Regulation 6 (1))



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size photo

THE ZAMBIA METROLOGY AGENCY
The Metrology Act, 2017
(Act No. 6 of 2017)

The Metrology (Certification of Competence) Regulations, 2021

APPLICATION FOR ISSUE OF DUPLICATE CERTIFICATE OF COMPETENCE

[Please tick] Citizen Applicant Non Citizen Applicant
Category applied for:

.....

Please write in BLOCK LETTERS

1	Personal Information	Please complete
	Surname	
	Forename	
	Maiden Name	
	ID/NRC: Number	
	Passport Number	
	ZMA - CC Number (where applicable)	
	Employee Number (where applicable)	
	Permit Number (where applicable)	
	Date of birth	
	Nationality	
	Sex	
	Postal address	
	Fax	
	Mobile Phone Number(s)	
	E- mail Address	
2	Residential Address	
	House Number	
	Street	
	District	
	Province/State	
	Country	
	Particulars of next of kin	
	Name	
	Relationship	
	Postal address	
	Town	
	Phone Number	
	Fax	
	E-mail Address	

Academic Qualifications

3		Qualification/level	Name of Institution	Examining Body	Year obtained	District, Province/State Country
	Primary					
	Secondary					
	College					
	Universities					
	Other					

If you need more space, write and attach on a separate sheet

EMPLOYMENT STATUS

Employed:..... **Unemployed:**.....

	Position / Designation	
	Name of Employer (Organisation or Institution)	
	Current field of practice	
	Postal address	
	Town	
	Phone Number	
	Fax	
	E-mail Address	

FOR INTERNATIONAL (NON-CITIZEN) APPLICANTS, THE FOLLOWING MUST BE SUBMITTED:

1. Academic and professional qualifications
2. Proof of legal entry into the country
3. Professional reference letter(s) from immediate former supervisor(s)
4. Attach recommendation letter from a recognised institution
5. Application forms must be accompanied by an offer of employment

DECLARATION

I.....hereby declare that the information given above is true and correct to the best of my knowledge. Should the information be verified to be false, this application shall be rendered invalid.

Signed: **Date:**

Contact(s) number (Cell).....

Please return the duly completed form including proof of payment of fees to:

**The Executive Director
The Zambia Metrology Agency
P.O. Box 30989
LUSAKA, ZAMBIA
Tel. +260 211 222294**

Email:info@zma.org.zm

FOR OFFICIAL USE ONLY

Comments by the Zambia Metrology Agency

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Application granted/rejected

Dated thisday of..... 20.....

Signed :

.....
Executive Director



THE ZAMBIA METROLOGY AGENCY

The Metrology Act, 2017
(Act No. 6 of 2017)

The Metrology (Certification of Competence) Regulations, 2021

DUPLICATE CERTIFICATE OF COMPETENCE

This is to certify that

.....
 has been granted certificate to practice as a

 for the period.....to.....

Dated thisday of..... 20.....

Signed :

.....
Executive Director

Form VI
(Regulation 7 (1))



Latest
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size photo

THE ZAMBIA METROLOGY AGENCY
The Metrology Act, 2017
(Act No. 6 of 2017)

The Metrology (Certification of Competence) Regulations, 2021

APPLICATION FOR RENEWAL OF COMPETENCE CERTIFICATE

[Please tick] Citizen Applicant Non-citizen Applicant

Category applied for:

1	Personal Information	Please complete
	Surname	
	Forename	
	Maiden Name	
	ID/NRC: Number	
	Passport Number	
	ZMA - CC Number (where applicable)	
	Employee Number (where applicable)	
	Permit Number (where applicable)	
	Date of birth	
	Nationality	
	Sex	
	Postal address	
	Fax	
	Mobile Phone Number(s)	
	E- mail Address	
2	Residential Address	
	House Number	
	Street	
	District	
	Province/State	
	Country	
Particulars of next of kin		
	Name	
	Relationship	
	Postal address	
	Town	
	Phone Number	
	Fax	
	E-mail Address	

Academic Qualifications

3		Qualification/level	Name of Institution	Examining Body	Year obtained	District, Province/State Country
	Primary					
	Secondary					
	College					
	Universities					
	Other					

If you need more space, write and attach on a separate sheet

EMPLOYMENT STATUS

Employed:..... **Unemployed:**.....

	Position / Designation	
	Name of Employer (Organisation or Institution)	
	Current field of practice	
	Postal address	
	Town	
	Phone Number	
	Fax	
	E-mail Address	

FOR INTERNATIONAL (NON-CITIZEN) APPLICANTS, THE FOLLOWING MUST BE SUBMITTED:

1. Academic and professional qualifications
2. Proof of legal entry into the country
3. Professional reference letter(s) from immediate former supervisor(s)
4. Attach recommendation letter from a recognised institution
5. Application forms must be accompanied by an offer of employment

DECLARATION

I.....hereby declare that the information given above is true and correct to the best of my knowledge. Should the information be verified to be false, this application shall be rendered invalid.

Signed: **Date:**

Contact(s) number (Cell).....

Please return the duly completed form including proof of payment of fees to:

**The Executive Director
The Zambia Metrology Agency
P.O. Box 30989
LUSAKA, ZAMBIA
Tel. +260 211 222294**

Email:info@zma.org.zm

FOR OFFICIAL USE ONLY

Comments by the Zambia Metrology Agency

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Application granted/rejected

Dated thisday of..... 20.....

Signed:

.....
Executive Director



THE ZAMBIA METROLOGY AGENCY

The Metrology Act, 2017
(Act No. 6 of 2017)

The Metrology (Certification of Competence) Regulations, 2021

NOTICE OF INTENTION TO SUSPEND OR REVOKE A CERTIFICATE OF COMPETENCE

(1) Here insert name of holder of Certificate of Competence To (1).....
.....
IN THE MATTER OF (2)..... you are hereby notified that the Executive Director intends to suspended/revoke your Certificate of Competence on the following grounds:

(2) Here insert Certificate of Competence number (a)
(b)
(c)
(d)

(3) Here insert number of days Accordingly, you are requested to show cause why your Certificate of Competence should not be suspended and to take action to remedy the breaches set out in paragraphs..... (above) within (3).....days of receiving this notice. Failure to remedy the said breaches shall result in the suspension or revocation of your Certificate of Competence.

Dated thisday of20.....

.....
Executive Director

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STAMP



THE ZAMBIA METROLOGY AGENCY
The Metrology Act, 2017
(Act No. 6 of 2017)

The Metrology (Certification of Competence) Regulations, 2021

NOTICE OF SUSPENSION OR REVOCATION CERTIFICATE OF COMPETENCE

(1) Here insert name of holder of Certificate of Competence To (1).....
 IN THE MATTER OF (2).....you are hereby notified that your Certificate of Competence has been suspended for (3)..... on the following grounds:

(2) Here insert Certificate of Competence number (a)
 (b)
 (c)
 (d)

(3) Here insert period of suspension or revocation

(4) Here insert number of days Accordingly, you are requested to take action to remedy the breaches set out in paragraphs..... (above) within (3).....days of receiving this notice. Failure to remedy the said breaches shall result in the revocation of your Certificate of Competence
 Dated thisday of20.....

.....
Executive Director





THE ZAMBIA METROLOGY AGENCY

The Metrology Act, 2017
(Act No. 6 of 2017)

The Metrology (Certification of Competence) Regulations, 2021

NOTICE OF RESTORATION OF CERTIFICATE OF COMPETENCE

(1) Here insert name of holder of Certificate of Competence To (1).....
.....

(2) Here insert Certificate of Competence number IN THE MATTER OF (2).....you are hereby notified that your Certificate of Competence has been restored.
Note that you are required to comply with the Terms and Conditions attached to the Certificate of Competence.

Dated thisday of20.....

.....
Executive Director



C. YALUMA,
Minister of Commerce Trade and Industry

Lusaka
11th May, 2021
[MCTI.101/21/2]

