

EXPERIENCE VERIFICATION - ELECTRICIAN ONLY

Access this form via website at : cca.hawaii.gov/pvl

PART I. TO BE COMPLETED BY APPLICANT

Fill in your NAME and ADDRESS only. Your supervisor/employer must complete the other sections and have the form notarized. After it is completed, ATTACH it to your application form.

NAME OF APPLICANT (First, Middle)		(Last)
Mailing Address of Applicant		Date

PART II. TO BE COMPLETED BY LICENSED ELECTRICIAN SUPERVISOR OR CONTRACTOR EMPLOYER OF APPLICANT OR APPLICANT IF SELF-EMPLOYED

Your assistance as a licensed electrician is necessary to provide valid and accurate verification of experience. Acceptable verification is from a licensed electrician working with and/or responsible for the applicant. **NOTE:** If self-employed, please provide verification of a valid contractor's or other appropriate license that allowed you to contract to perform electrical work.

NOTE: If the state in which you supervised the applicant does not require licensure as a journey worker, supervising, or master electrician and only requires a contractor's license, you may complete the form and attach verification of licensure that shall include the effective date of the license that allowed you to perform electrical work. **Please sign before a Notary Public.** Please return this completed "Experience Verification" form to the **APPLICANT** who must attach it to the application form.

Please indicate your license before verifying the applicant's experience:

Name and Address of Supervisor	Employer's Name and Address
Title: _____	Type of Business: _____
Years of Experience: _____	License No.: _____
Electrician Lic. No.: (Required) _____	
Years Licensed: _____	

Applicant's Employment Information:

Employment Date	Termination Date	Total Length of Employment	Average Hours Per Week
		yrs. mos.	

EXPERIENCE: 1. Is applicant's work performed in compliance with the National Electric Code? Yes No
2. **Describe in detail** the electrical work performed by the applicant.

(CONTINUED ON PAGE 2 - NOTARIZED SIGNATURE REQUIRED)

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

PART II. TO BE COMPLETED BY SUPERVISOR/EMPLOYER OF APPLICANT OR APPLICANT IF SELF-EMPLOYED (Continued from page 1)

Besides describing the applicant's experience, please indicate the total hours for each work process/task as listed below:

ELECTRICIAN	<u>Specific Work Process/Task</u>	<u>Total Hours Per Task</u>
	<p>Branch circuit wiring: installation of cable assemblies/wires; termination of wires and panelboards; installation of receptacles, switches, light fixtures, signal, and other electrical devices including, but not limited to transformers and magnetic starters/contactors; single and three-phase systems of various voltages. If applying for EJ - minimum of 5,000 hours If applying for EJI - minimum of 1,000 hours</p>	_____
	<p>Conduit installation: installation of rigid conduit, electrical metallic tubing, polyvinyl chloride conduit, flexible metal conduit, metal molding, and any other apparatus designed to carry electrical wires. If applying for EJ - minimum of 2,000 hours If applying for EJI - minimum of 1,000 hours</p>	_____
	<p>Industrial wiring: installation and maintenance of substation equipment, switchboards, bus ducts, automatic controls, cable splicing, and other industrial work. If applying for EJI - minimum of 5,000 hours</p>	_____
	<p>Specialized wiring: electric power generating systems (installation of PV systems, wind/water power generating systems, including conduit installation, grounding/bonding and conductor installation, appurtenances related to the operation of electric power generating systems); other systems (installation and maintenance of temperature and refrigeration controls, motor generators). If applying for EJ - minimum of 500 hours</p>	_____
	<p>Low voltage systems: installation of communication and signal wires and related equipment associated with communications systems, security/video and fire alarms, signal/call systems, master or community radio/television receiving antenna systems, sound public address and other systems operating at 50 volts or less. If applying for EJ - minimum of 500 hours If applying for EJS - minimum of 5,000 hours</p>	_____
	<p>Electrical Maintenance: keeping in repair and operation of any and all existing electrical installations, apparatus, and equipment, and any extensions to these installations, apparatus, and equipment that do not exceed one branch circuit capacity for each specific extension; provided that electrical maintenance work shall not include new installations; new branch circuit wiring; additions or modifications to any existing electrical installations, apparatus, and equipment; repairs to electrical service equipment; or any other work that requires a building or electrical permit from the counties; and provided further that any replacements of existing electrical installations, apparatus, and equipment shall be done with the same electrical fixtures, devices, and equipment. If applying for EM - minimum of 2,000 hours</p>	_____

TOTAL HOURS OF EXPERIENCE. _____

AFFIDAVIT:

I swear that the information provided is true and correct. I understand that any misrepresentation is grounds for refusal to grant or possible disciplinary action against the licensee.

 Print Name of Supervisor, Employer, or Applicant if Self-Employed in front of Notary Public

 Signature of Supervisor, Employer, or Applicant if Self-Employed in front of Notary Public

 Date

Subscribed and sworn to before me this

_____ day of _____ A.D. 20 ____ .

Notary Public, State of Hawaii

My commission expires: _____

Print Name: _____

Doc. Date: _____ No. of Pages: _____

Notary Name: _____ Circuit Court: _____

Doc. Description _____

Notary Signature: _____

Date: _____