

Note: Unless your work experience was gained through self-employment, applications must be accompanied by at least one Employer Declaration. For more information, see Instructions for Certification Challenge.

They maintain and service systems by inspecting and testing components, brazing and soldering parts to repair defective joints, adjusting and replacing worn or defective components and reassembling repaired components and systems. As part of service and commissioning, refrigeration and air conditioning mechanics start-up, test, charge, adjust, calibrate, balance, measure, verify, maintain and document systems.

- worked a minimum of **9,315 hours** performing the tasks listed in Section D, and
- experience performing at least **70%** of the job tasks listed in Section D

April 2025

REFRIGERATION AND AIR CONDITIONING MECHANIC

STATUTORY DECLARATION OF WORK EXPERIENCE

SkilledTradesBC Customer Service
800 – 8100 Granville Ave
Richmond, BC V6Y 3T6
Tel: 778-328-8700
Fax: 778-328-8701
Toll Free: 1-866-660-6011
customerservice@skilledtradesbc.ca

C. Reason for Statutory Declaration

Indicate why a Statutory Declaration is required for this period of employment:

- ☐ Applicant was self-employed ☐ Employer will/can not complete Employer Declaration

Applicants **must** attempt to contact current or previous employers to request an Employer Declaration to be filled out and signed.

If you have been unable to obtain an Employer Declaration for any portion of your non-self-employed work experience, **indicate the steps you have taken to try to obtain it.**

D. Statutory Declaration of Job Task Performance

By checking “Yes” or “No” in the Declaration Response column, indicate whether you have performed the job tasks listed below during the period indicated in Section B.

JOB TASKS (61)	DECLARATION RESPONSE	
PERFORMS COMMON OCCUPATIONAL SKILLS		
Performs safety-related functions		
Maintains safe work environment	☐ Yes	☐ No
Performs lock-out, tagout and isolation procedures	☐ Yes	☐ No
Uses personal protective equipment (PPE) and safety equipment	☐ Yes	☐ No
Uses tools and equipment		
Uses hand tools	☐ Yes	☐ No
Uses portable and stationary power tools	☐ Yes	☐ No
Uses brazing and soldering equipment	☐ Yes	☐ No
Uses recovery and recycling tools and equipment	☐ Yes	☐ No
Uses evacuation tools and equipment	☐ Yes	☐ No

Enter the applicant's initials on every page of this form

I hereby certify, that to the best of my knowledge, the information I am providing is true and accurate.	Applicant's Initials:
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JOB TASKS (61)	DECLARATION RESPONSE	
Uses charging tools and equipment	☐ Yes	☐ No
Uses diagnostic and measuring tools and equipment	☐ Yes	☐ No
Uses access equipment	☐ Yes	☐ No
Uses rigging, hoisting and lifting equipment	☐ Yes	☐ No
Uses digital technology	☐ Yes	☐ No
Organizes work		
Interprets drawings and specifications	☐ Yes	☐ No
Uses documentation and reference material	☐ Yes	☐ No
Plans job tasks and procedures	☐ Yes	☐ No
Uses communication and mentoring techniques		
Uses communication techniques	☐ Yes	☐ No
Uses mentoring techniques	☐ Yes	☐ No
PERFORMS ROUTINE TRADE ACTIVITIES		
Performs work site preparation		
Prepares work site	☐ Yes	☐ No
Handles materials and supplies	☐ Yes	☐ No
Performs trade activities		
Performs trade activities	☐ Yes	☐ No
Performs leak and pressure tests on system	☐ Yes	☐ No
Evacuates systems	☐ Yes	☐ No
Uses refrigerants, gases and oils	☐ Yes	☐ No
Performs field wiring of systems	☐ Yes	☐ No
Applies sealants and adhesives	☐ Yes	☐ No
PLANS INSTALLATION		
Plans installation of HVAC/R systems		
Verifies HVAC/R system parameters and requirements	☐ Yes	☐ No
Selects HVAC/R equipment, components and accessories	☐ Yes	☐ No

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JOB TASKS (61)	DECLARATION RESPONSE	
Determines placement of HVAC/R equipment, components and accessories	☐ Yes	☐ No
Performs HVAC/R material take-off	☐ Yes	☐ No
Plans installation of control systems		
Verifies control system parameters and requirements	☐ Yes	☐ No
Selects control system components and accessories	☐ Yes	☐ No
Determines placement of control system components and accessories	☐ Yes	☐ No
Performs control system material take-off	☐ Yes	☐ No
PERFORMS INSTALLATION		
Installs HVAC/R systems		
Confirms system layout	☐ Yes	☐ No
Assembles HVAC/R equipment, components and accessories	☐ Yes	☐ No
Places HVAC/R equipment, components and accessories	☐ Yes	☐ No
Installs fasteners, brackets and hangers	☐ Yes	☐ No
Installs HVAC/R piping and tubing	☐ Yes	☐ No
Applies HVAC/R holding charge	☐ Yes	☐ No
Installs control systems		
Places control system components	☐ Yes	☐ No
Connects control systems	☐ Yes	☐ No
PERFORMS COMMISSIONING		
Commissions HVAC/R systems		
Performs pre-start-up checks for HVAC/R systems	☐ Yes	☐ No
Performs start-up of HVAC/R systems	☐ Yes	☐ No
Completes HVAC/R system charge	☐ Yes	☐ No
Sets up primary and secondary HVAC/R system components	☐ Yes	☐ No
Commissions control systems		
Performs pre-start-up checks for HVAC/R systems	☐ Yes	☐ No
Performs start-up of HVAC/R systems	☐ Yes	☐ No

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JOB TASKS (61)	DECLARATION RESPONSE	
Completes HVAC/R system charge	☐ Yes	☐ No
Sets up primary and secondary HVAC/R system components	☐ Yes	☐ No
Commissions control systems		
Performs start-up checks for control systems	☐ Yes	☐ No
Verifies/sets operating parameters	☐ Yes	☐ No
PERFORMS MAINTENANCE AND SERVICE		
Maintains HVAC/R systems		
Inspects HVAC/R systems	☐ Yes	☐ No
Performs predictive and scheduled maintenance on HVAC/R systems	☐ Yes	☐ No
Tests HVAC/R system components and accessories	☐ Yes	☐ No
Services HVAC/R systems		
Troubleshoots HVAC/R systems	☐ Yes	☐ No
Repairs HVAC/R systems	☐ Yes	☐ No
Maintains and services control systems		
Performs maintenance and inspection on control systems	☐ Yes	☐ No
Troubleshoots control systems	☐ Yes	☐ No
Calibrates operating and safety controls	☐ Yes	☐ No
Repairs control systems	☐ Yes	☐ No

E. Applicant Signature

I certify that the information I have provided is true and accurate. (Note: Collection and protection of personal information on this form is in accordance with the provisions of the Freedom of Information and Protection of Privacy Act.)

Applicant Name (please print):	Applicant Signature:	Date: (MM/DD/YYYY)
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F. References

Minimum of Three References must accompany **each Statutory Declaration form**. Include names and contact information of minimum three individuals who can attest to your hours and/or scope of trade. References listed must be related to the organization and period of employment listed in Section B of this form.

Each individual listed will be contacted by SkilledTradesBC to verify the information provided on your application.

1. Reference

Relationship to Applicant:			☐ Former Employee	☐ Contractor	☐ Supplier
			☐ Co-worker	☐ Client	☐ Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference:		Language(s) that reference can communicate: (Check all that apply)			
		☐ English ☐ Other (specify):			
Organization/Business Name:			Position/Title:		
Phone Number:			Email Address:		

2. Reference

Relationship to Applicant:			☐ Former Employee	☐ Contractor	☐ Supplier
			☐ Co-worker	☐ Client	☐ Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference:		Language(s) that reference can communicate: (Check all that apply)			
		☐ English ☐ Other (specify):			
Organization/Business Name:			Position/Title:		
Phone Number:			Email Address:		

3. Reference

Relationship to Applicant:			☐ Former Employee	☐ Contractor	☐ Supplier
			☐ Co-worker	☐ Client	☐ Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference:		Language(s) that reference can communicate: (Check all that apply)			
		☐ English ☐ Other (specify):			
Organization/Business Name:			Position/Title:		
Phone Number:			Email Address:		

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