

This form is used to declare work experience for periods during which you were self-employed, or a previous employer will not complete an Employer Declaration.

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 or Supervision and Sign-off Authority.

“Heavy Duty Equipment Technician” means a person who maintains, manufactures, overhauls, reconditions and repairs equipment powered by internal combustion engines or electricity and without limiting the foregoing, including graders, loaders, shovels, off-highway tractors, off-highway trucks, forklifts, wheeled and tracked vehicles of all types used in construction, logging, sawmill, manufacturing, mining and other similar industry.

To qualify to challenge certification in this trade or be granted authority to supervise and sign-off on apprentices in this trade, individuals must have:

- worked a minimum of **9,495 hours** performing the tasks listed in Section D, and
- experience performing at least **70%** of the job tasks listed in Section D.

Holders of a **Certificate of Qualification in Truck and Transport Mechanic** will be eligible to challenge this certification by documenting **4,995 hours** of directly related work experience.

Holders of a **Certificate of Qualification in Transport Trailer Technician or Diesel Engine Mechanic** will be eligible to challenge this certification by documenting **7,995 hours** of directly related work experience.

Holders of a Canadian **military certificate** in **Vehicle Technician MT #129 / MT #411, QL5 or higher** will be eligible to challenge this certification by submitting an [Exam Application Form](#) along with a copy of the certificate.

A. Applicant Name

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------

B. Self-Employment or Employment Information of Applicant

Enter the contact information for your own business if you are self-employed or your previous employer who will not complete an Employer Declaration.

Name of Organization/Employer/Business:		Business Registration Number: (Self-Employment only)	
Business Address (Street Name/Number, Building/Unit Number):			City:
Province/ State:	Country:	Postal Code/ Zip Code:	
Business Phone Number: ()	Email Address:	Website:	

Enter the dates and number of hours for this period of employment or self-employment. You may combine multiple periods of self-employment on one form, but you must separate periods of employment with different employers on separate forms.

Dates of Employment (MM/DD/YYYY): From: To:		Total Number Hours of Heavy-Duty Equipment Technician Experience Accumulated in Period:
Job Title of Applicant:		

HEAVY DUTY EQUIPMENT TECHNICIAN

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 (133)	DECLARATION RESPONSE	
Performs safety-related functions		
Performs hazard analysis	☐ Yes	☐ No
Maintains safe work environment	☐ Yes	☐ No
Uses personal protective equipment (PPE) and safety equipment	☐ Yes	☐ No
Implements safety protocols for hybrid and all-electric equipment and attachments	☐ Yes	☐ No
Uses and maintains tools and equipment		
Uses hand, power, measuring, testing and diagnostic tools	☐ Yes	☐ No
Uses shop equipment	☐ Yes	☐ No
Uses access equipment	☐ Yes	☐ No
Uses hoisting, rigging, lifting, cribbing and blocking 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:
--	-----------------------

HEAVY DUTY EQUIPMENT TECHNICIAN

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

JOB TASKS (133)	DECLARATION RESPONSE	
Uses welding equipment	☐ Yes	☐ No
Uses heating and cutting equipment	☐ Yes	☐ No
Uses electronic service tools and systems for diagnostics and programming	☐ Yes	☐ No
Performs routine work practices		
Uses documentation and reference materials	☐ Yes	☐ No
Prepares job action plan	☐ Yes	☐ No
Maintains fluids and lubricants	☐ Yes	☐ No
Services hoses, tubing, piping and fittings	☐ Yes	☐ No
Services bearings and seals	☐ Yes	☐ No
Uses fasteners and sealing materials	☐ Yes	☐ No
Services safety features	☐ Yes	☐ No
Performs operational check-out	☐ Yes	☐ No
Uses communication and mentoring techniques		
Uses communication techniques	☐ Yes	☐ No
Uses mentoring techniques	☐ Yes	☐ No
Services, diagnoses and repairs base engines		
Services base engines	☐ Yes	☐ No
Diagnoses base engines	☐ Yes	☐ No
Repairs base engines	☐ Yes	☐ No
Services, diagnoses and repairs lubrication systems		
Services lubrication systems	☐ Yes	☐ No
Diagnoses lubrication systems	☐ Yes	☐ No
Repairs lubrication systems	☐ Yes	☐ No
Services, diagnoses and repairs intake systems		
Services intake systems	☐ Yes	☐ No
Diagnoses intake systems	☐ Yes	☐ No
Repairs intake systems	☐ 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:
--	-----------------------

HEAVY DUTY EQUIPMENT TECHNICIAN

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

JOB TASKS (133)	DECLARATION RESPONSE	
Services, diagnoses and repairs exhaust systems		
Services exhaust systems	☐ Yes	☐ No
Diagnoses exhaust systems	☐ Yes	☐ No
Repairs exhaust systems	☐ Yes	☐ No
Services, diagnoses and repairs engine management systems		
Services engine management systems	☐ Yes	☐ No
Diagnoses engine management systems	☐ Yes	☐ No
Repairs engine management systems	☐ Yes	☐ No
Services, diagnoses and repairs fuel delivery systems		
Services fuel delivery systems	☐ Yes	☐ No
Diagnoses fuel delivery systems	☐ Yes	☐ No
Repairs fuel delivery systems	☐ Yes	☐ No
Services, diagnoses and repairs emission control systems		
Services emission control systems	☐ Yes	☐ No
Diagnoses emission control systems	☐ Yes	☐ No
Repairs emission control systems	☐ Yes	☐ No
Services, diagnoses and repairs cooling systems		
Services cooling systems	☐ Yes	☐ No
Diagnoses cooling systems	☐ Yes	☐ No
Repairs cooling systems	☐ Yes	☐ No
Services, diagnoses and repairs steering systems		
Services steering systems	☐ Yes	☐ No
Diagnoses steering systems	☐ Yes	☐ No
Repairs steering systems	☐ Yes	☐ No
Services, diagnoses and repairs suspension systems		
Services suspension systems	☐ Yes	☐ No
Diagnoses suspension systems	☐ Yes	☐ No
Repairs suspension systems	☐ 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:
--	-----------------------

HEAVY DUTY EQUIPMENT TECHNICIAN

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

JOB TASKS (133)	DECLARATION RESPONSE	
Services, diagnoses and repairs brake systems		
Services brake systems	☐ Yes	☐ No
Diagnoses brake systems	☐ Yes	☐ No
Repairs brake systems	☐ Yes	☐ No
Services, diagnoses and repairs undercarriage systems		
Services undercarriage systems	☐ Yes	☐ No
Diagnoses undercarriage systems	☐ Yes	☐ No
Repairs undercarriage systems	☐ Yes	☐ No
Services, diagnoses and repairs wheel assemblies		
Services wheel assemblies	☐ Yes	☐ No
Diagnoses wheel assemblies	☐ Yes	☐ No
Repairs wheel assemblies	☐ Yes	☐ No
Services, diagnoses and repairs charging systems		
Services charging systems	☐ Yes	☐ No
Diagnoses charging systems	☐ Yes	☐ No
Repairs charging systems	☐ Yes	☐ No
Services, diagnoses and repairs starting systems		
Services starting systems	☐ Yes	☐ No
Diagnoses starting systems	☐ Yes	☐ No
Repairs starting systems	☐ Yes	☐ No
Services, diagnoses and repairs battery systems		
Services battery systems	☐ Yes	☐ No
Diagnoses battery systems	☐ Yes	☐ No
Repairs battery systems	☐ Yes	☐ No
Services, diagnoses and repairs electrical components		
Services electrical components	☐ 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:
--	-----------------------

HEAVY DUTY EQUIPMENT TECHNICIAN

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

JOB TASKS (133)	DECLARATION RESPONSE	
Diagnoses electrical components	☐ Yes	☐ No
Repairs electrical components	☐ Yes	☐ No
Services, diagnoses and repairs equipment management systems and electronic components		
Services equipment management systems and electronic components	☐ Yes	☐ No
Diagnoses equipment management systems and electronic components	☐ Yes	☐ No
Repairs equipment management systems and electronic components	☐ Yes	☐ No
Services, diagnoses and repairs clutches		
Services clutches	☐ Yes	☐ No
Diagnoses clutches	☐ Yes	☐ No
Repairs clutches	☐ Yes	☐ No
Services, diagnoses and repairs torque converters, fluid couplers and hydraulic retarders		
Services torque converters, fluid couplers and hydraulic retarders	☐ Yes	☐ No
Diagnoses torque converters, fluid couplers and hydraulic retarders	☐ Yes	☐ No
Repairs torque converters, fluid couplers and hydraulic retarders	☐ Yes	☐ No
Services, diagnoses and repairs manual transmissions and transfer cases		
Services manual transmissions and transfer cases	☐ Yes	☐ No
Diagnoses manual transmissions and transfer cases	☐ Yes	☐ No
Repairs manual transmissions and transfer cases	☐ Yes	☐ No
Services, diagnoses and repairs automatic and powershift transmissions		
Services automatic and powershift transmissions	☐ Yes	☐ No
Diagnoses automatic and powershift transmissions	☐ Yes	☐ No
Repairs automatic and powershift transmissions	☐ Yes	☐ No
Services, diagnoses and repairs driveline systems		
Services driveline systems	☐ Yes	☐ No
Diagnoses driveline systems	☐ 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:
--	-----------------------

HEAVY DUTY EQUIPMENT TECHNICIAN

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

JOB TASKS (133)	DECLARATION RESPONSE	
Repairs driveline systems	☐ Yes	☐ No
Services, diagnoses and repairs drive axles and differentials		
Services drive axles and differentials	☐ Yes	☐ No
Diagnoses drive axles and differentials	☐ Yes	☐ No
Repairs drive axles and differentials	☐ Yes	☐ No
Services, diagnoses and repairs final drive systems		
Services final drive systems	☐ Yes	☐ No
Diagnoses final drive systems	☐ Yes	☐ No
Repairs final drive systems	☐ Yes	☐ No
Services, diagnoses and repairs heating systems		
Services heating systems	☐ Yes	☐ No
Diagnoses heating systems	☐ Yes	☐ No
Repairs heating systems	☐ Yes	☐ No
Services, diagnoses and repairs ventilation and filtration systems		
Services ventilation and filtration systems	☐ Yes	☐ No
Diagnoses ventilation and filtration systems	☐ Yes	☐ No
Repairs ventilation and filtration systems	☐ Yes	☐ No
Services, diagnoses and repairs air conditioning systems		
Services air conditioning systems	☐ Yes	☐ No
Diagnoses air conditioning systems	☐ Yes	☐ No
Repairs air conditioning systems	☐ Yes	☐ No
Services, diagnoses and repairs sound suppression systems		
Services sound suppression systems	☐ Yes	☐ No
Diagnoses sound suppression systems	☐ Yes	☐ No
Repairs sound suppression systems	☐ Yes	☐ No
Services, diagnoses and repairs hydraulic systems		
Services hydraulic systems	☐ 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:
--	-----------------------

HEAVY DUTY EQUIPMENT TECHNICIAN

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

JOB TASKS (133)	DECLARATION RESPONSE	
Diagnoses hydraulic systems	☐ Yes	☐ No
Repairs hydraulic systems	☐ Yes	☐ No
Services, diagnoses and repairs hydrostatic systems		
Services hydrostatic systems	☐ Yes	☐ No
Diagnoses hydrostatic systems	☐ Yes	☐ No
Repairs hydrostatic systems	☐ Yes	☐ No
Services, diagnoses and repairs pneumatic systems		
Services pneumatic systems	☐ Yes	☐ No
Diagnoses pneumatic systems	☐ Yes	☐ No
Repairs pneumatic systems	☐ Yes	☐ No
Services, diagnoses and repairs structural components		
Services structural components	☐ Yes	☐ No
Diagnoses structural components	☐ Yes	☐ No
Performs mechanical repairs on structural components	☐ Yes	☐ No
Services, diagnoses and repairs operator station components		
Services operator station components	☐ Yes	☐ No
Diagnoses operator station components	☐ Yes	☐ No
Repairs operator station components	☐ Yes	☐ No
Services, diagnoses and repairs attachments and accessories		
Services attachments and accessories	☐ Yes	☐ No
Diagnoses attachments and accessories	☐ Yes	☐ No
Repairs attachments and accessories	☐ Yes	☐ No
Installs attachments and accessories	☐ Yes	☐ No
Services, diagnoses and repairs hybrid equipment		
Services hybrid 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:
--	-----------------------

HEAVY DUTY EQUIPMENT TECHNICIAN

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

JOB TASKS (133)	DECLARATION RESPONSE	
Diagnoses hybrid equipment	☐ Yes	☐ No
Repairs hybrid equipment	☐ Yes	☐ No
Services, diagnoses and repairs all electric equipment		
Services all-electric equipment	☐ Yes	☐ No
Diagnoses all-electric equipment	☐ Yes	☐ No
Repairs all-electric equipment	☐ 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)

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:

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:	

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:
--	-----------------------