INSULATOR (HEAT AND FROST)

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

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.

"Insulators (Heat and Frost)" work with different kinds of insulating material to prevent or reduce the passage of heat, cold, vapour, moisture, sound or fire. They read and interpret drawings and specifications to determine insulation requirements, select the amount and type of insulation to be installed, and measure and cut insulating material to the required dimensions. They then apply, install, repair and maintain insulating material on mechanical systems, such as piping, tanks, vessels, and HVAC systems. Insulated surfaces may be finished with materials such as plastics, aluminum, galvanized steel and coated steel, stainless steel, canvas, mastics or finishing cement. Insulators (Heat and Frost) also lay out and fabricate components on-site or remove and/or encapsulate old insulation. Removing material such as asbestos, ceramic fibers and lead is also part of the trade. Insulators (Heat and Frost) also spray insulating materials and install fireproofing and fire stop systems. Insulators (Heat and Frost) work in commercial and industrial settings, such as gas plants, refineries, hospitals, schools, and convention centers.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:

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 **9,990 hours** performing the tasks listed in Section D, and
- experience performing at least **70%** of the job tasks listed in Section D.

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 **Insulator (Heat and Frost)** Experience Accumulated in Period:
Job Title of Applicant:	

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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 (46)	DECLARATION RESPONSE	
Performs Safety-Related Functions		
Uses personal protective equipment (PPE) and safety equipment	☐ Yes	☐ No
Maintains safe work environment	☐ Yes	☐ No
Uses And Maintains Tools And Equipment		
Uses tools and equipment	☐ Yes	☐ No
Uses access equipment	☐ Yes	☐ No
Organizes Work		
Performs task scheduling	☐ 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 (46)	DECLARATION RESPONSE	
Organizes materials on site	☐ Yes	☐ No
Uses Communication And Mentoring Techniques		
Uses communication and mentoring techniques	☐ Yes	☐ No
Performs Routine Trade Practices		
Performs measurements and calculations	☐ Yes	☐ No
Interprets specifications and drawings	☐ Yes	☐ No
Prepares substrates	☐ Yes	☐ No
Selects materials	☐ Yes	☐ No
Performs layout	☐ Yes	☐ No
Insulates Piping And Fittings		
Installs insulation on piping, fittings and hangers	☐ Yes	☐ No
Applies vapour barriers on piping and fittings	☐ Yes	☐ No
Installs cladding, jacketing and finishes on piping and fittings	☐ Yes	☐ No
Insulates Tank, Vessels And Equipment		
Installs insulation on tanks, vessels and equipment	☐ Yes	☐ No
Applies vapour barriers on tanks, vessels and equipment	☐ Yes	☐ No
Installs cladding, jacketing and finishes on tanks, vessels and equipment	☐ Yes	☐ No
Insulates Plumbing And Mechanical Piping Systems		
Installs insulation on plumbing and mechanical piping systems	☐ Yes	☐ No
Applies vapour barrier on insulated plumbing and mechanical piping systems	☐ Yes	☐ No
Installs cladding, jacketing and finishes on insulated plumbing and mechanical piping systems	☐ Yes	☐ No
Insulates Mechanical Ducting		
Installs insulation on mechanical ducting	☐ Yes	☐ No
Installs vapour barrier on insulated mechanical ducting	☐ Yes	☐ No
Installs cladding, jacketing and finishes on insulated mechanical ducting	☐ Yes	☐ No
Insulates Mechanical Equipment		
Installs insulation on mechanical equipment	☐ Yes	☐ No
Applies vapour barrier on insulated mechanical equipment	☐ Yes	☐ No

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JOB TASKS (46)	DECLARATION RESPONSE	
Installs Fire Stop Systems		
Identifies approved fire stop system	☐ Yes	☐ No
Applies fire stop materials to architectural, structural, mechanical and electrical components	☐ Yes	☐ No
Insulates For Soundproofing		
Insulates piping and equipment for soundproofing	☐ Yes	☐ No
Installs acoustic assemblies for soundproofing	☐ Yes	☐ No
Installs Removable Cover		
Fabricates removable covers	☐ Yes	☐ No
Fastens removable covers	☐ Yes	☐ No
Installs Underground Insulating Systems		
Installs pipe insulation to underground systems	☐ Yes	☐ No
Installs pour-in-place and spray-on insulation to underground systems	☐ Yes	☐ No
Sprays Sealers, Coatings And Spray-On Insulation		
Prepares material, equipment, surrounding work area and substrate for spraying	☐ Yes	☐ No
Applies reinforcing material, spray insulation, coatings and sealers	☐ Yes	☐ No
Installs Fireproofing		
Applies fireproofing to architectural, structural, mechanical and electrical components	☐ Yes	☐ No
Applies protective covering to fireproofing materials	☐ Yes	☐ No
Installs Insulation For Refractory Systems		
Applies insulation to refractory systems	☐ Yes	☐ No
Installs reflective systems	☐ Yes	☐ No
Installs cladding, jacketing and finishes to refractory systems	☐ Yes	☐ No
Installs Insulation For Cryogenic Systems		
Applies insulation to cryogenic systems	☐ Yes	☐ No
Applies vapour barriers to insulated components of cryogenic systems	☐ Yes	☐ No

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JOB TASKS (46)	DECLARATION RESPONSE	
Installs cladding, jacketing and finishes to cryogenic systems	☐ Yes	☐ No
Insulates For Marine Applications		
Insulates bulkheads, deckheads and hulls; Installs cladding, jacketing and finishes on marine applications	☐ Yes	☐ No
Performs Asbestos Abatement		
Prepares for asbestos abatement; Remove and maintain asbestos; Perform lead abatement and mould remediation	☐ 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

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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 ☐ Co-worker ☐ Contractor ☐ Client ☐ Supplier ☐ 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 ☐ Co-worker ☐ Contractor ☐ Client ☐ Supplier ☐ 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 ☐ Co-worker ☐ Contractor ☐ Client ☐ Supplier ☐ 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: