

# 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

*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.*

To qualify to challenge certification in this trade, individuals must have:

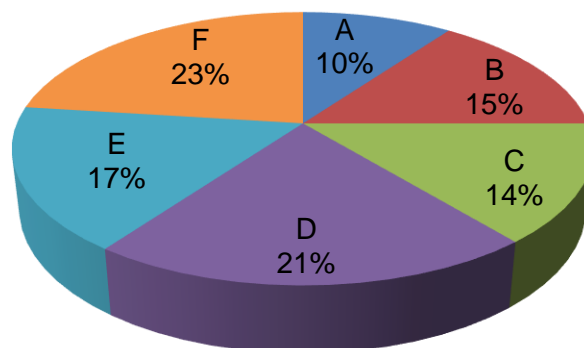
- worked a minimum of **9,315 hours** performing the tasks listed in Section D, and
- experience performing at least **70%** of the job tasks listed in Section D

Holders of a **military certificate** in **Refrigeration and Mechanical Technician (MT #301 / MT #641)**, **QL5 or higher** will be eligible to challenge this certification.

### Red Seal Exam Weighting

This pie chart represents the distribution of questions on the Red Seal Exam. Section D of this form shows the Tasks and Sub-tasks within each Major Work Activity and the number of questions assigned to each Major Work Activity and Task.

The Red Seal Exam for this trade has **125 questions**.



	Major Work Activity / Exam Section	Exam Weightage	Number of Questions in Exam
A	Performs common occupational skills	10%	13
B	Performs routine trade activities	15%	19
C	Plans installation	14%	18
D	Performs installation	21%	26
E	Performs commissioning	17%	21
F	Performs maintenance and service	23%	28

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**A. Applicant Name**

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
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**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)	
Mailing Address:			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):		Total Number Hours of <b>Refrigeration and Air conditioning mechanic</b> Experience Accumulated in that Period:
From:	To:	
Job Title of Applicant:		

*Enter the applicant name (repeat on every page of this form)*

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
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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.** If sufficient evidence of steps taken is not provided, the application may not be approved.

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**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	Number of questions on the Red Seal exam	DECLARATION RESPONSE
<b>A – PERFORMS COMMON OCCUPATIONAL SKILLS (10%)</b>		
<b>Task-1 Performs safety-related functions</b> - Maintains safe work environment. - Performs lock-out, tagout and isolation procedures. - Uses personal protective equipment (PPE) and safety equipment.	3	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Task-2 Uses tools and equipment</b> - Uses hand tools. - Uses portable and stationary power tools. - Uses brazing and soldering equipment. - Uses recovery and recycling tools and equipment. - Uses evacuation tools and equipment. - Uses charging tools and equipment.	5	<input type="checkbox"/> Yes <input type="checkbox"/> No

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JOB TASKS	Number of questions on the Red Seal exam	DECLARATION RESPONSE
<ul style="list-style-type: none"> <li>- Uses diagnostic and measuring tools and equipment.</li> <li>- Uses access equipment.</li> <li>- Uses rigging, hoisting and lifting equipment.</li> <li>- Uses digital technology.</li> </ul>		
<p><b>Task-3 Organizes work</b></p> <ul style="list-style-type: none"> <li>- Interprets drawings and specifications.</li> <li>- Uses documentation and reference material.</li> <li>- Plans job tasks and procedures.</li> </ul>	3	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p><b>Task-4 Uses communication and mentoring techniques</b></p> <ul style="list-style-type: none"> <li>- Uses communication techniques.</li> <li>- Uses mentoring techniques.</li> </ul>	2	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>B – PERFORMS ROUTINE TRADE ACTIVITIES (15%)</b>		
<p><b>Task-5 Performs work site preparation</b></p> <ul style="list-style-type: none"> <li>- Prepares work site.</li> <li>- Handles materials and supplies.</li> </ul>	5	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p><b>Task-6 Performs trade activities</b></p> <ul style="list-style-type: none"> <li>- Performs trade activities.</li> <li>- Performs leak and pressure tests on system.</li> <li>- Evacuates systems.</li> <li>- Uses refrigerants, gases and oils.</li> <li>- Performs field wiring of systems.</li> <li>- Applies sealants and adhesives.</li> </ul>	14	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>C – PLANS INSTALLATION (14%)</b>		
<p><b>Task-7 Plans installation of HVAC/R systems</b></p> <ul style="list-style-type: none"> <li>- Verifies HVAC/R system parameters and requirements.</li> <li>- Selects HVAC/R equipment, components and accessories.</li> <li>- Determines placement of HVAC/R equipment, components and accessories.</li> <li>- Performs HVAC/R material take-off.</li> </ul>	11	<input type="checkbox"/> Yes <input type="checkbox"/> No

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JOB TASKS	Number of questions on the Red Seal exam	DECLARATION RESPONSE
<p><b>Task-8 Plans installation of control systems</b></p> <ul style="list-style-type: none"> <li>- Verifies control system parameters and requirements.</li> <li>- Selects control system components and accessories.</li> <li>- Determines placement of control system components and accessories.</li> <li>- Performs control system material take-off.</li> </ul>	7	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>D – PLANS INSTALLATION (21%)</b>		
<p><b>Task-9 Installs HVAC/R systems</b></p> <ul style="list-style-type: none"> <li>- Confirms system layout.</li> <li>- Assembles HVAC/R equipment, components and accessories.</li> <li>- Places HVAC/R equipment, components and accessories.</li> <li>- Installs fasteners, brackets and hangers.</li> <li>- Installs HVAC/R piping and tubing.</li> <li>- Applies HVAC/R holding charge.</li> </ul>	16	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p><b>Task-10 Installs control systems</b></p> <ul style="list-style-type: none"> <li>- Places control system components.</li> <li>- Connects control systems.</li> </ul>	10	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>E – PERFORMS COMMISSIONING (17%)</b>		
<p><b>Task-11 Commissions HVAC/R systems</b></p> <ul style="list-style-type: none"> <li>- Performs pre-start-up checks for HVAC/R systems.</li> <li>- Performs start-up of HVAC/R systems.</li> <li>- Completes HVAC/R system charge.</li> <li>- Sets up primary and secondary HVAC/R system components.</li> </ul>	13	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p><b>Task-12 Commissions control systems</b></p> <ul style="list-style-type: none"> <li>- Performs start-up checks for control systems.</li> <li>- Verifies/sets operating parameters.</li> </ul>	8	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>F – PERFORMS MAINTENANCE AND SERVICE (23%)</b>		
<p><b>Task-13 Maintains HVAC/R systems</b></p> <ul style="list-style-type: none"> <li>- Inspects HVAC/R systems.</li> <li>- Performs predictive and scheduled maintenance on HVAC/R systems.</li> <li>- Tests HVAC/R system components and accessories.</li> </ul>	8	<input type="checkbox"/> Yes <input type="checkbox"/> No

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JOB TASKS	Number of questions on the Red Seal exam	DECLARATION RESPONSE
<b>Task-14 Services HVAC/R systems</b> - Troubleshoots HVAC/R systems. - Repairs HVAC/R systems.	11	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Task-15 Maintains and services control systems</b> - Performs maintenance and inspection on control systems. - Troubleshoots control systems. - Calibrates operating and safety controls. - Repairs control systems.	9	<input type="checkbox"/> Yes <input type="checkbox"/> No

**E. Applicant Signature**

I certify that the information I have provided is 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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*Enter the applicant name (repeat 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 ITA to verify the information provided on your application.

#### 1. Reference

Relationship to Applicant:		
<input type="checkbox"/> Former Employee	<input type="checkbox"/> Contractor	<input type="checkbox"/> Supplier
<input type="checkbox"/> Co-worker	<input type="checkbox"/> Client	<input type="checkbox"/> 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)	
	<input type="checkbox"/> English	<input type="checkbox"/> Other (specify):
Organization/Business Name:	Position/Title:	
Phone Number:	Email Address:	

#### 2. Reference

Relationship to Applicant:		
<input type="checkbox"/> Former Employee	<input type="checkbox"/> Contractor	<input type="checkbox"/> Supplier
<input type="checkbox"/> Co-worker	<input type="checkbox"/> Client	<input type="checkbox"/> 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)	
	<input type="checkbox"/> English	<input type="checkbox"/> Other (specify):
Organization/Business Name:	Position/Title:	
Phone Number:	Email Address:	

#### 3. Reference

Relationship to Applicant:		
<input type="checkbox"/> Former Employee	<input type="checkbox"/> Contractor	<input type="checkbox"/> Supplier
<input type="checkbox"/> Co-worker	<input type="checkbox"/> Client	<input type="checkbox"/> 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)	
	<input type="checkbox"/> English	<input type="checkbox"/> Other (specify):
Organization/Business Name:	Position/Title:	
Phone Number:	Email Address:	

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