

### EMPLOYER 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

Legal Last Name:

customerservice@skilledtradesbc.ca

This form is used to declare work experience for periods of employment and must be completed by a **direct supervisor of the applicant**, who will be contacted by SkilledTradesBC.

Note: An Employer Declaration of Work Experience form must be completed for each period of employment.

This form is not to be used for periods of self-employment. For more information, see Instructions for Certification.

Legal Middle Name(s):

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

- worked a minimum of **4,500 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:

Enter the name of the individual for whom this form is being completed.

B. Employment Information	n of Applicant			
Enter the business information for the app	plicant's period of employment	declared for this trade.		
Name of Organization/Employer/Business:				
Mailing Address:		City:		
Province/ State:	Country:	Postal Code/ Zip Code:		
Business Phone Number:	Website:			
Enter the dates and number of hours for	this period of employment.			
Dates of Applicant's Employment (MM/DD/YYYY):		Total Number Hours of <b>Gasfitter – Class B</b> Experience Accumulated in that Period:		
From: To:				
Job Title of Applicant:	<u> </u>			



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#### C. Supervisor Contact Information

Enter the name and contact information for the person who directly supervised the applicant during this employment period. Ensure the information given is current as the application will be denied if this person cannot be contacted by SkilledTradesBC.

	<del>_</del>		
First and Last Name of Applicant's Direct Supervisor:	Supervisor Position or Title:		
Supervisor's Phone Number:  Supervisor E-Mail Address:			
Language(s) that the employer/supervisor can communicate: (check al	l that apply)		
☐ English ☐ Other (please spe	ecify):		
_ English office specific	(Cary).		
D. Supervisor Declaration of Job Task Perform	nance of Applicant		
By checking "Yes" or "No" in the Declaration Response column, in personally witnessed the applicant performing the job tasks listed.	dicate whether you, as the direct superviso	or of the applican	it, have
JOB TASKS (50)		SUPERVISOR DECLARATION RESPONSE	
COMMON OCCUPATIONAL SKILLS			
Task-1 Performs safety-related functions			
Uses personal protective equipment (PPE) and safety equipment		Yes	☐ No
Maintains safe work environment		☐ Yes	☐ No
Task-2 Maintains and uses tools and equipment			
Maintains hand, power and powder-actuated tools		☐ Yes	☐ No
Uses technical instruments and testers		☐ Yes	☐ No
Uses access equipment		☐ Yes	☐ No
Operates lifting, rigging and hoisting equipment		☐ Yes	☐ No
Task-3 Plans and prepares for installation, service	and maintenance		
Interprets drawings and codes		☐ Yes	☐ No
Selects systems, equipment and components		☐ Yes	☐ No
Organizes work		☐ Yes	☐ No
GAS PIPING PREPARATION AND ASSEMBLY			
Task-4 Fits tube and tubing for gas piping systems			
Prepares tube and tubing for fitting		☐ Yes	☐ No
Enter the supervisor and applicant names (repeat on every page of	this form)		
Supervisor First and Last Name:	Applicant First and Last Name:		

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JOB TASKS (50)		SUPERVISOR DECLARATION RESPONSE	
Bends tube and tubing for gas piping systems			☐ No
Connects tube and tubing for gas piping systems		☐ Yes	☐ No
Task-5 Fits plastic pipe for gas piping systems			
Prepares plastic pipe for fitting		Yes	☐ No
Connects plastic pipe for gas piping systems		☐ Yes	☐ No
Task-6 Fits steel pipe for gas piping systems			
Prepares steel pipe for fitting		☐ Yes	☐ No
Connects steel pipe for gas piping systems		☐ Yes	☐ No
VENTING AND AIR SUPPLY SYSTEMS			
Task-7 Installs venting			
Lays out venting		☐ Yes	☐ No
Prepares venting material for assembly		☐ Yes	☐ No
Connects material for venting		☐ Yes	☐ No
Task-8 Installs air supply system			
Lays out air supply system		☐ Yes	☐ No
Connects air supply systems		Yes	☐ No
Task-9 Installs draft control systems			
Installs natural draft control systems		☐ Yes	☐ No
Installs mechanical draft control systems		☐ Yes	☐ No
CONTROLS AND ELECTRICAL SYSTEMS			
Task-10 Selects and installs electronic components	S		
Performs selection and installation of combustion controls		☐ Yes	☐ No
Performs selection and installation of flame safeguards		☐ Yes	☐ No
Performs selection and installation of safety and operating controls		☐ Yes	☐ No
Task-11 Selects and installs electrical components			
Selects electrical components		☐ Yes	☐ No
Performs assembly and connection of electrical components		☐ Yes	☐ No
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JOB TASKS (50)		SUPERVISOR DECLARATION RESPONSE	
Task-12 Installs automation and instrumentation control systems			
Performs selection of automation and instrumentation control systems	☐ Yes	☐ No	
Performs assembly and connection of automation and instrumentation control systems	☐ Yes	☐ No	
INSTALLATION OF SYSTEMS AND EQUIPMENT			
Task-13 Installs gas-fired system piping and equipment			
Installs gas-fired equipment	☐ Yes	☐ No	
Installs gas piping systems	Yes	☐ No	
Connects gas supply to equipment	☐ Yes	☐ No	
Connects equipment to energy distribution systems	☐ Yes	☐ No	
Task-14 Installs gas-fired system components			
Installs valve trains	☐ Yes	☐ No	
Installs accessories		☐ No	
Task-15 Installs propane storage and handling systems			
Installs propane storage systems		☐ No	
Installs propane handling systems		☐ No	
TESTING AND COMMISSIONING OF GAS FIRED SYSTEMS			
Task-16 Tests gas-fired systems			
Tests gas piping systems		☐ No	
Performs start-up procedures		☐ No	
Task-17 Commissions gas-fired systems			
Performs testing, adjusting and balancing procedures		☐ No	
Completes commissioning report and handover		☐ No	
SERVICING GAS FIRED SYSTEMS			
Task-18 Maintains gas-fired systems			
Inspects system components and operation		☐ No	
Performs maintenance activities		☐ No	
Task-19 Repairs gas-fired systems			
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JOB TASKS (50)			SUPERVISOR DECLARATION RESPONSE		
Diagnoses gas-fired equipment and componen	ts			☐ Yes	☐ No
Selects replacement components			☐ Yes	☐ No	
Replaces components			☐ Yes	☐ No	
Verifies operation			☐ Yes	☐ No	
Task-20 Decommissions gas-fired system	ms				
Disconnects appliances and accessories			☐ Yes	☐ No	
Removes gas-fired systems and components				☐ Yes	☐ No
I certify that the information I, as the current or former direct supervisor of the applicant, have provided is true Collection and protection of personal information on this form is in accordance with the provisions of the Free Protection of Privacy Act.)  Supervisor name (Please Print):  Supervisor Signature:					
Enter the supervisor and applicant names (repeat on every page of this form)					
Supervisor First and Last Name:		Applicant First and Las	t Name:		