

HOW TO OBTAIN A QUALIFYING PARTY CERTIFICATE



Every license must have at least one Qualifying Party (QP) for each classification of work covered by the license. This is the person who has the requisite experience and takes and passes the required exam(s).

ONE: Determine the classification of license and/or certification you need to do the work you intend to perform. The license and qualifying party certificate classifications are found in the New Mexico Administrative Code, Title 14 Chapter 6 Part 6. It can be found at public.psiexams.com.

IMPORTANT NOTE: If you are uncertain of the proper classification, please complete a "Classification Determination Request form" and submit it to PSI along with a detailed description of the work to be performed. If the Qualifying Party Certificate is needed to perform work that will be awarded based on a competitive process, please also include a copy of the project scope of work. To ensure clear communication, responses to Classification Determination Form requests are not made by phone. Forms are available online at public.psiexams.com. A written response will be mailed to you.

TWO: Submit complete packet. A QUALIFYING PARTY APPLICATION PACKET MUST INCLUDE:

1. Complete, legible, **signed, and notarized** Qualifying Party application.
2. Complete, legible, **signed, and notarized** Work Experience Affidavit for the classifications you wish to test for. Use one form per employer/affiant verifying your experience or hours. Use the work experience verification form specific to the classification(s): Mechanical/Plumbing Work Experience Affidavit, Electrical Work Experience Affidavit, and General Building Work Experience Affidavit form for all other classifications.

Note: Individuals who are qualified to complete the Affidavit are as follows: Employers (past or present), Supervisors, Foremen, and other Contractors. DO NOT LEAVE ANY BLANKS.

All qualifying parties must have the required experience for the specific classification(s) of work the license will cover. Work experience requirements are:

TWO YEARS (4,000 hours)

Residential Building (**GB-2**) and Building Specialties (**GS-1 through GS-34**)
Asphalt Bitumen and Concrete Construction (**GA-1 through GA-5**)
Fixed Works (**GF-1 through GF-9**)
Residential Wiring (**ER-1**) and Electrical Specialties (**ES-1 through ES-10**)
Mechanical Specialties (**MS-3 and MS-6**)

FOUR YEARS (8,000 HOURS)

General Building (**GB-98**)
Asphalt Bitumen and Concrete Construction (**GA98**)
Fixed Works (**GF-98**)
Electrical- Residential and Commercial (**EE-98**)
Electrical Distribution Systems (**EL-1**)
Mechanical (**MM-98**)
Plumbing (**MM-1**)
Natural Gas Fitting (**MM-2**)
HVAC (**MM-3**)
Process Piping (**MM-4**)
Fire Sprinklers (**MS-12**)
Dry Chemical Fire Protection (**MS-14**)

All experience must have been gained while employed by a contractor licensed in the trade being applied for or considered legal work in the state in which the work was performed. There are some limited exceptions to the work experience requirement. Military, out of the country and homeowner experience may be used in some circumstances. Please contact PSI for more information on these exceptions.

HELPFUL TIP: Have your experience verification form completed and notarized in duplicate. Keep an original signed and notarized form in your files. This will be useful if you need to reapply.

1. There is an application fee of \$30.00. You may submit one application with multiple classifications but there is a separate Certificate fee of \$6.00 for **each** classification. These fees will only be processed if you are approved. If your application is rejected for any reason, the fees will be returned to you along with your application(s) and supporting document(s).
2. A self-addressed stamped envelope (letter-size) with sufficient return postage. This envelope will be used to send your application packet back to you if your submission is rejected.

THREE: Complete packets must be delivered by hand or mail. Faxed or emailed forms will **NOT** be accepted. **All notarized forms submitted must be original, wet ink signatures.** Submit completed packets to:

PSI 2820 Broadbent Pkwy NE, Suite E&F Albuquerque, NM 87107

INCOMPLETE PACKETS WILL NOT BE PROCESSED. If your packet is incomplete, incorrect, or insufficient, it will be returned to you.

FOUR: After your application has been accepted, your experience has been verified, and your eligibility is cleared, you will be notified by email that you have been approved to test. USPS will be used if email is not provided.

FIVE: Once approval to test has been received you must pay for, schedule, take, and pass the required exam(s)*. You may schedule to test by calling PSI at 800-733-9276, or go online at psiexams.com. Each exam requires a separate fee.

* In addition to trade specific exams if required, ALL new QP applicants must take and pass the Business and Law test offered by PSI **or** take an **approved** Business and Law course and receive a course completion certificate. Check public.psiexams.com for an approved providers list. Neither the State of New Mexico nor PSI sponsors these schools.

SIX: After you have passed the required exam(s)/Business and Law course, you must submit passing score reports (and Business and Law course Certificate if applicable) along with a Contractor License Application or a Status Change Form.

All requirements for certification must be met within **six months** from the date PSI approves your application and affidavit or your application fees will be forfeit and you will have to apply and pay for an additional six months of approval. If your approval to test has expired, you must submit and extension request to extend your approval, even if your test scores are within one year. **A qualifying party can only be attached to a contractor's license if they have an active approval.**

You will have 12 months from the date of your exams to attach your certificate to a valid license. **Failure to attach to a valid license within those 12 months will result in the automatic cancellation of your QP certificate.**

NOTE: All QP certificates are valid indefinitely if they are attached to an active license. Once detached from a license, a QP Certificate will automatically cancel if not reattached to a license within two consecutive years and will have to reapply and retest.

NEW MEXICO CONSTRUCTION INDUSTRIES DIVISION APPLICATION for QUALIFYING PARTY CERTIFICATE

AN INCOMPLETE, INCORRECT OR OTHERWISE DEFECTIVE APPLICATION WILL NOT BE PROCESSED.
PLEASE PRINT CLEARLY. USE ALL CAPITAL LETTERS.

1. APPLICANT INFORMATION:

TODAY'S DATE (MM/DD/YYYY)

FIRST NAME

MIDDLE NAME

LAST NAME

ADDRESS

CITY

STATE

ZIP CODE

AGE

SOCIAL SECURITY NUMBER

DAYTIME PHONE

ALTERNATIVE PHONE

2. CLASSIFICATIONS: Enter the classification(s) for which you are applying. Consult the New Mexico Administrative Code 14.6.6.9 for classifications. **DO NOT USE THIS FORM TO APPLY FOR JOURNEYMAN CERTIFICATION.**

Classification Code (Example:

GB98, GS04, GF09)

Classification Name

OFFICIAL USE ONLY

Cert #: _____ Issued: _____

Cert #: _____ Issued: _____

Cert #: _____ Issued: _____

3. QUALIFYING PARTY APPLICANT'S HISTORY:

QP Name

Email

a) Are you applying for an **EXTENSION** for our approval to test? _____NO _____YES

b) Have **you** previously been a Qualifying Party for a licensed **New Mexico** contractor? _____NO _____YES

IF "YES" provide the following information. Please attach separate sheets, if necessary.

Company Name: _____

NM License # _____ Dates: ____/____/____ to ____/____/____
MO YR MO YR

Have you performed work in the last 12 months outside the scope of your classification(s)? _____NO _____YES

IF "Yes", attach a detailed explanation.

c) Are you applying for a **NASCLA WAIVER**? _____NO _____YES

IF "Yes", attach a Letter of Good Standing from the state you are licensed in.

d) Are you applying for an MHD crossover classification GS29 Installation of Modular Buildings? _____NO _____YES

IF "YES" please attach proof of your current and active MHD Installer 1, 2, or 3.

MHD License #: _____ MHD License Type: _____

PLEASE NOTE: If you are applying for an MHD Crossover License, your MHD License must remain active and in good standing during the entire period or crossover licensure.

OFFICIAL USE ONLY:

DATE: ____/____/____ AMOUNT \$ _____ MC _____ VISA _____ AMEX _____ DISC _____ CK _____ CK# _____

APPROVAL IS VALID UNTIL: ____/____/____

BY: _____

- e) If you are a New Mexico certified Journeyman, provide the following information: _____ NO _____ YES
 Classification Code: _____ Certificate Number _____
 Classification Code: _____ Certificate Number _____
- f) Are you current with child support regulations in New Mexico? _____ N/A _____ NO _____ YES
- g) Are there any unpaid judgments against you from any state? _____ NO _____ YES
- h) Do you have any outstanding fines with CID? _____ NO _____ YES
- i) Do you have any outstanding permit fees with any jurisdiction? _____ NO _____ YES
- j) Have you bid or performed any unlicensed work in the last 12 months? _____ NO _____ YES
- k) Do you have any unresolved complaints with CID or in any other state? _____ NO _____ YES
- l) Has your license or certificate ever been revoked in any other state? _____ NO _____ YES
- m) Are you licensed or a qualifying party in any other state? Submit verification

If you have answered "yes" to any of the above questions g-m, submit a detailed explanation with documentation.
 If you have answered "no" to question f, submit a d detailed explanation with documentation.

4. AFFIRMATION AND SIGNATURE

I hereby affirm, under penalty of perjury, that all information provided in this application is true and correct to the best of my knowledge. I understand that any false statement by me in this application may result in administrative action against any license or certification issued on the basis of this application. I further acknowledge that I am required to immediately notify PSI, in writing, of any material change in my status as a licensee, qualifying party (including without limitation change of address, change of qualifying party, change of licensee name or legal entity), and failure to do so can result in administrative action up to and including revocation of the license or certificate affected by the change.

Applicant Signature _____

Please print your full name _____

Date _____, 20____

5. NOTARY

Subscribed and sworn before me this _____ day of _____ 20____.

 Notary Public SEAL

My commission expires _____, 20____

6. **PAYMENT:** An application fee of **\$30 PLUS** a certificate fee of **\$6.00 for EACH classification** is required to be submitted with the application.

Submit Application Packet and Payment to (by walk-in or mail):
PSI, 2820 Broadbent Pkwy NE, Suite E & F, Albuquerque, NM 87107
 (877) 663-9267 public.psiexams.com

➡ Payments may be made by personal check, company check, money order, cashier's check, credit card (NO CASH)
ALL SUBMISSIONS MUST INCLUDE ORIGINAL DOCUMENTS.
YOU MAY NOT SUBMIT AN APPLICATION BY FAX OR EMAIL.

Check one: MC _____ VISA _____ AMEX _____ DISC _____ Full Card No. _____

Expiration Date: _____ Card Verification No: _____ Zip Code: _____

Cardholder Name (Print) _____ Signature: _____

For your security, PSI requires you to enter the card identification number located on the credit card. The card identification number is usually located on the back of the card and consists of the last three digits on the signature strip.