

PSI ELECTRICAL EXPERIENCE VERIFICATION

NEW MEXICO CONTRACTOR LICENSING SERVICE

THIS WORK EXPERIENCE VERIFICATION MUST BE SUBMITTED WITH AN APPLICATION AND APPROVED BEFORE EXAMS MAY BE SCHEDULED.
TYPE OR PRINT CLEARLY. INCOMPLETE OR ILLEGIBLE FORMS WILL NOT BE PROCESSED.

PLEASE READ THE FOLLOWING INSTRUCTIONS PRIOR TO COMPLETING THE ATTACHED WORK EXPERIENCE VERIFICATION. FOLLOWING INSTRUCTIONS COMPLETELY WILL AVOID DELAYS IN PROCESSING APPLICATION.

INSTRUCTIONS FOR THE APPLICANT

Only the top portion of the Affidavit is to be completed by the Applicant. Complete ALL information requested.

For a description of the scope of work allowed under each classification, please refer to the Regulation and Licensing Department, New Mexico Administrative Code, Classifications and Scopes (section 14.6.6.9 of the New Mexico Administrative Code, found online at public.psiexams.com).

One or more forms may be completed and submitted to meet the experience requirements. ***ALL EXPERIENCE MUST BE WITHIN THE LAST 10 YEARS.** Approval shall be given to test ONLY for the license classifications(s) listed on the Affidavit.

NOTE: You may include education/technical training to satisfy the experience requirements. For qualifying party and Journeyman candidates, each year of training may be credited as one-half (1/2) year of experience, but in no case shall credited training exceed one-half (1/2) of the total experience requirement. Please include copies of your official transcripts and/or certificates.

INSTRUCTIONS FOR EXPERIENCE VERIFICATION

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

The person certifying the experience must submit proof/verification of their position within the company. Out of state **Contractors** must attach a copy of their current state license to the affidavit. If your experience is with a company from a state that does not require a license, you must submit proof/verification that the company is an active/valid company. (Tax certificate, business license listing the company name, corporation papers, etc.)

***The work experience verification must be signed by the person certifying the experience and notarized.**
***All attachments must be signed by the person certifying the work experience.**

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 this work experience requirement. For example certain military, out of the country and homeowner experience may be used in some circumstances. Please contact PSI for more information regarding these exceptions. Work experience requirements are a minimum of:

TWO YEARS (4,000 HOURS)

ER1, ER1J
ES1, ES1J
ES2, ES2J
ES3, ES3J
ES7, ES7J

FOUR YEARS (8,000 hours)

EE98, E98J
EL1, EL1J

APPLICANT: Upon completion of the Affidavit, please deliver original(s) with the appropriate application form by mail or in person to:

PSI, 2820 Broadbent Pkwy NE, Suite E&F, ALBUQUERQUE, NM, 87106
(Please include a self-addressed, stamped envelope)

Please allow 10-14 working days for processing.

If approved, PSI will mail you an eligibility card containing exam registration and scheduling information.

ELECTRICAL EXPERIENCE VERIFICATION

Candidate Name: _____ Date: _____

Address: _____ City _____ State _____ Zip _____

SS#: _____ CLASSIFICATION(S) APPLYING FOR: _____

*A COMPLETED QUALIFYING PARTY or JOURNEYMAN APPLICATION MUST BE SUBMITTED WITH THIS AFFIDAVIT. USE ONLY INK AND DO NOT MAKE CORRECTIONS USING CORRECTIVE FLUID OR ANY OTHER MEANS. INCOMPLETE, ILLEGIBLE OR CORRECTED FORMS WILL BE RETURNED AND PROCESSING WILL BE DELAYED.

RESIDENTIAL, COMMERCIAL AND INDUSTRIAL - REQUIRED EXPERIENCE

*CIRCLE THE CLASSIFICATION THE APPLICANT IS APPLYING FOR AND CHECK THE BOXES THAT APPLY TO THE CANDIDATE'S WORK EXPERIENCE AND LIST THE HOURS OF EXPERIENCE. YOU MAY ATTACH ANY ADDITIONAL INFORMATION IN REFERENCE TO THE APPLICANT'S WORK EXPERIENCE. ALL ATTACHMENTS MUST BE SIGNED BY THE PERSON CERTIFYING THE EXPERIENCE.

EE98/EE98J - RESIDENTAL AND COMMERCIAL ELECTRICAL

- Underground installation (e.g. conduit installation, underground conductor or cable installation)
Rough in installation (e.g. conduit installation, pull conductors, install cable, terminate conductors, install boxes, install electrical panels)
Trim out (e.g. install receptacles or devices, install appliances, install breakers, install luminaires)

ER1/ER1J - RESIDENTIAL ELECTRICAL

- Underground installation (e.g. conduit installation, underground conductor or cable installation)
Rough in installation (e.g. conduit installation, pull conductors, install cable, terminate conductors, install boxes, install electrical panels)
Trim out (e.g. install receptacles or devices, install appliances, install breakers, install luminaires)

Commercial Hours _____
Residential Hours _____
TOTAL HOURS _____

SPECIALTIES - REQUIRED EXPERIENCE

*CIRCLE THE CLASSIFICATION THE APPLICANT IS APPLYING FOR AND CHECK THE BOXES THAT APPLY TO THE CANDIDATE'S WORK EXPERIENCE AND LIST THE HOURS OF EXPERIENCE. YOU MAY ATTACH ANY ADDITIONAL INFORMATION IN REFERENCE TO THE APPLICANT'S WORK EXPERIENCE. ALL ATTACHMENTS MUST BE SIGNED BY THE PERSON CERTIFYING THE EXPERIENCE.

E1J/ES -1 SIGNS

- Rough in (e.g. install concrete base, install sign enclosure)
Trim out (e.g. install lamps in signs, install sign, install transformers)

TOTAL HOURS _____

EL1J/EL1 ELECTRICAL DISTRIBUTION/TRANSMISSION

- Underground installations (ductwork, underground conductor or cable installations, terminations)
Overhead distribution (pole, conductor installations, transformer installations, terminations)
Overhead transmission (poles/towers, tower foundations, conductor installations, terminations)
Substations (transformers, switches, terminal facilities)

TOTAL HOURS _____

ES2J/ES-2 CATHODIC LIGHTNING PROTECTION

- Underground (e.g. install cable and conduit)
Trim out (e.g. install rectifier, other electrical equipment associated with cathodic or lightning systems)

TOTAL HOURS _____

ES3J/ES-3 LOW VOLTAGE

- Rough in (e.g. install boxes, cable, equipment)
Trim out (e.g. install low voltage equipment and devices, test equipment)

TOTAL HOURS _____

ES7J/ES-7 TELEPHONE

- Underground (e.g. install cable, junction boxes)
Overhead (e.g. install cables, conductors, support structures)
Trim out (e.g. terminate conductors, install telephone equipment and devices, and test)

TOTAL HOURS _____

SIGNATURE OF PERSON CERTIFYING THE WORK EXPERIENCE: _____

Candidate Name: _____ Date: _____

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 this work experience requirement. For example certain military, volunteer, and homeowner experience may be used in some circumstances.

(CIRCLE ONE)

PART TIME or FULL TIME

Hours per week _____

1. THIS WORK WAS PERFORMED FROM _____ / _____ TO _____ / _____
MO YR MO YR

WHILE APPLICANT WAS EMPLOYED BY _____ CO. LICENSE # _____

ATTACH A COPY OF THE LICENSE

**IF THE APPLICANT'S EXPERIENCE IS WITH A COMPANY FROM A STATE THAT DOES NOT REQUIRE A LICENSE, YOU MUST SUBMIT PROOF/VERIFICATION THAT THE COMPANY IS AN ACTIVE/VALID COMPANY. (Tax certificate, business license listing the company name, corporation papers, etc.)*

2. ADDITIONAL WORK EXPERIENCE INFORMATION ATTACHED YES NO (attachment must be signed)

3. APPLICANT'S POSITION WHILE PERFORMING WORK: (CHECK ONE)

JOURNEYMAN FOREMAN SUPERVISOR CONTRACTOR OTHER _____

4. I HELD THE FOLLOWING POSITION WHILE APPLICANT WAS PERFORMING THE WORK. (CHECK ONE)

EMPLOYER CONTRACTOR SUPERVISOR FOREMAN OTHER _____

**Contractors must attach a copy of their current state license. If your position with the company does not require a license, you must submit proof/verification of your position with the company.*

Do not leave any blanks!

Applications/work verifications that are incomplete or that do not have requested attachments will be rejected.

PERSON CERTIFYING (Print)

In making this certification for _____ (candidate name), I _____ (person certifying), have not relied on statements made to me by applicant or third parties, and swear under penalty of perjury that the information provided in this certification is true and correct to the best of my personal knowledge. I understand that my license may be subject to discipline if the information given and attested to by me herein is determined to be intentionally misleading or fraudulent.

Signature of Person Certifying LICENSE # _____ STATE _____
(Attach a copy of the license)

Address City State Zip

Phone # _____ Fax # _____ Email _____

NOTARY

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

SEAL

Notary Public

My commission expires _____ 20_____