



# Journey-Level Conveyance Mechanic Certification of Work Experience

**INSTRUCTIONS:**

The applicant shall complete the information in Part 1 below, then the person certifying the work experience (**business owner or manager**) shall complete Part 2. The Los Angeles Department of Building and Safety reserves the right to contact the certifier to verify work experience and/or dates. If additional space is needed to list the experience, please attach a separate sheet that must also be signed under the same certification statement contained below.

Use a separate form for each employer. **Please type or print neatly and legibly in black or dark blue ink—pencil is not acceptable.** Forms containing strikeouts or modifications may not be accepted. Corrections must be initialed by the certifier.

<b>PART 1- APPLICANT INFORMATION</b>		
The <u>Applicant</u> must complete Part 1 <u>before</u> the certifier completes Part 2		
<u>Name</u>		
First:	Last:	Middle:
<input type="checkbox"/> New Application	<input type="checkbox"/> Renewal Application	<input type="text"/> License #

<b>PART 2- WORK EXPERIENCE AND CERTIFICATION STATEMENT</b>			
The <u>Certifier</u> must complete Part 2 <u>after</u> the applicant completes Part 1			
Employer:			
License #:	Self-employed:	Yes	No
<u>Employer's street address</u>			
Number/Street:	City:	State:	ZIP:
<u>Name of Certifier</u>	<u>Telephone # of Certifier</u>	<u>Certifier email address</u>	
Certifiers job title:			
Applicants job title:			
<b>DATES</b> (List only dates that the applicant was engaged in work related to the type of examination indicated in Part 1)			
From	To	<b>Equals</b> Years	Months
In the space below, list all specific trade duties the applicant performed that were related to the examination listed in Part 1. (do not list specific project names)			
I Certify that I have <b>direct knowledge of the work covering the time period outlined above.</b> I certify under penalty of perjury, under the laws of the State of California, that the information stated above is true and correct.			
Date:	Signature:	Printed Name:	