

POWERLINE TECHNICIAN

TRADE EXPERIENCE VERIFICATION FORM

Date: _____
Employer: _____
Address: _____

Postal Code _____
Phone: _____ Fax: _____
Email: _____

This is to verify that _____ has worked as a **POWERLINE TECHNICIAN** from (month/year) _____ to (month/year) _____ for a total of _____ hours spending the following percentage of the time at the tasks below:

Install Primary Overhead Lines	_____ %
Secondary Overhead Circuits	_____ %
Underground Residential Distribution	_____ %
1 and 3 Phase Transfmrs. and Switch Equip.	_____ %
Maintain Overhead & Underground Apparatus	_____ %
Live Line Maintenance	_____ %
Operation of Isolation & Protective Devices	_____ %
Street Lighting Equipment	_____ %
Mechanical & Hydraulic Equip. Operation	_____ %
Other (Please specify): _____	_____ %
Total	100 %

Please indicate the type of equipment and the type of work this person was involved with during this time period: _____

(If more space is required, please continue on reverse side.)

Print name of Company Representative

Position of Company Representative

Signature of Company Representative

Date

Signature of Employee

Date