





# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
800 – 8100 Granville Ave  
Richmond, BC V6Y 3T6  
Tel: 778-328-8700  
Fax: 778-328-8701  
Toll Free: 1-866-660-6011  
customerservice@itabc.ca

### C. Reason for Statutory Declaration

Indicate why a Statutory Declaration is required for this period of employment:

- Applicant was self-employed
- Employer will/can not complete Employer Declaration

Applicants **must** attempt to contact current or previous employers to request an Employer Declaration to be filled out and signed.

If you have been unable to obtain an Employer Declaration for any portion of your non-self-employed work experience, **indicate the steps you have taken to try to obtain it.** If sufficient evidence of steps taken is not provided, the application may not be approved.

---



---



---



---



---



---

*Enter the applicant name (repeat on every page of this form)*

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------



# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
800 – 8100 Granville Ave  
Richmond, BC V6Y 3T6  
Tel: 778-328-8700  
Fax: 778-328-8701  
Toll Free: 1-866-660-6011  
customerservice@itabc.ca

### D. Statutory Declaration of Job Task Performance

By checking “Yes” or “No” in the Declaration Response column, indicate whether you have performed the job tasks listed below during the period indicated in Section B.

Asphalt Milling Machine – Job Tasks	Declaration Response
<b>CHALLENGE TIME REQUIRED</b> The applicant has at least <b>450 hours</b> seat time operating an Asphalt Milling Machine with your company	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>WORK SAFELY</b> <ul style="list-style-type: none"> <li>• Compliance with all regulatory requirements and established safe practices, including:               <ul style="list-style-type: none"> <li>○ Uses correct PPE</li> <li>○ Entering and exiting machine using 3-point contact                   <ul style="list-style-type: none"> <li>▪ Seatbelts</li> <li>▪ Lockout</li> </ul> </li> <li>○ Pinch points, including between conveyor and trucks                   <ul style="list-style-type: none"> <li>▪ Aware of traffic and traffic patterns</li> <li>▪ Maintaining safe distance between roller and other paving equipment (3 meters)</li> </ul> </li> <li>○ Safe parking and securing of machine</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>ASPHALT MILLING MACHINE FUNDAMENTALS</b> <ul style="list-style-type: none"> <li>• Understanding of milling team rolls and responsibilities</li> <li>• Getting machine into position</li> <li>• Set teeth in ground (precise)</li> <li>• Moving forward according to cut pattern</li> <li>• Able to adjust up &amp; down to precise cut depths</li> <li>• Complies with markers</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>ASPHALT MILLING MACHINE MAINTENANCE</b> <ul style="list-style-type: none"> <li>• References manuals for specific machines</li> <li>• Walk around - pre-op check</li> <li>• Performs winter maintenance – drain all water, replace/maintain</li> <li>• Inspection and replacement of profiling teeth</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>FOLLOW SHUT-DOWN PROCEDURES</b> <ul style="list-style-type: none"> <li>• Proper engine cool-down</li> <li>• Record keeping</li> <li>• Safe parking and lockout</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Enter the applicant name (repeat on every page of this form)

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------



# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
 800 – 8100 Granville Ave  
 Richmond, BC V6Y 3T6  
 Tel: 778-328-8700  
 Fax: 778-328-8701  
 Toll Free: 1-866-660-6011  
 customerservice@itabc.ca

Asphalt Paver – Job Tasks	Declaration Response
<b>CHALLENGE TIME REQUIRED</b> The applicant has at least <b>450 hours</b> seat time operating an Asphalt Paver with your company	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>WORK SAFELY</b> <ul style="list-style-type: none"> <li>• Compliance with all regulatory requirements and established safe practices, including:               <ul style="list-style-type: none"> <li>○ Uses correct PPE</li> <li>○ Entering and exiting machine using 3-point contact</li> <li>○ Pinch points including between hopper and trucks</li> <li>○ Safe parking and securing of machine</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>ASPHALT PLACEMENT PROCESS</b> <ul style="list-style-type: none"> <li>• Correct positioning of paver for the job</li> <li>• Placing the haul truck load into the hopper</li> <li>• Place asphalt products effectively</li> <li>• Keeping tight to joints and overlaps</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>ASPHALT PAVER OPERATION FUNDAMENTALS</b> <ul style="list-style-type: none"> <li>• Positioning paver</li> <li>• Ready paver (heating the screed &amp; on blocks)</li> <li>• Following the line</li> <li>• Smooth transition of material to screed</li> <li>• Consistent head of material on screed (material pushed by screed)               <ul style="list-style-type: none"> <li>○ Keeping hopper full</li> </ul> </li> <li>• Trucks back to paver properly               <ul style="list-style-type: none"> <li>○ Flow of mix from truck into hopper and hopper to the screed</li> </ul> </li> <li>• Truck driver &amp; operator hand signals through truck mirrors and horn               <ul style="list-style-type: none"> <li>○ Hand signals should be slow &amp; controlled</li> </ul> </li> <li>• Paver operator should be aware of overhead power lines &amp; other overhead obstacles</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>ASPHALT PAVER MAINTENANCE</b> <ul style="list-style-type: none"> <li>• Daily operator checks</li> <li>• Reference: manufacturer specs</li> <li>• End of day: general clean of screed, hoppers, augers, screed deck, extensions, top of pavers, etc. Methods:               <ul style="list-style-type: none"> <li>○ Scraping</li> <li>○ Release agents</li> </ul> </li> <li>• Environmental concerns</li> <li>• Biodegradable solvents               <ul style="list-style-type: none"> <li>○ Commonly missed spots</li> </ul> </li> <li>• Corners or hopper, screeds</li> <li>• Hydraulic extensions</li> <li>• Push rollers</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>COMPLIANCE WITH MARKERS, GRADES AND STAKES</b> <ul style="list-style-type: none"> <li>• Follow the line               <ul style="list-style-type: none"> <li>○ Precision developed through experience</li> <li>○ Staying with markers</li> <li>○ Aim vs. steering – set sight ahead</li> <li>○ Pay attention!</li> <li>○ Trucks come in straight</li> <li>○ Keep it smooth</li> </ul> </li> <li>• Able to proficiently operate paver on various grades</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Enter the applicant name (repeat on every page of this form)

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------



# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
800 – 8100 Granville Ave  
Richmond, BC V6Y 3T6  
Tel: 778-328-8700  
Fax: 778-328-8701  
Toll Free: 1-866-660-6011  
customerservice@itabc.ca

Asphalt Paver – Job Tasks	Declaration Response
<b>FOLLOW SHUT-DOWN PROCEDURES</b> <ul style="list-style-type: none"> <li>• Proper engine cool-down</li> <li>• Record keeping</li> <li>• Safe parking and lockout</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>TRANSPORT PAVER</b> <ul style="list-style-type: none"> <li>• Width regulations               <ul style="list-style-type: none"> <li>○ “Wide load”, removing extensions, etc.</li> </ul> </li> <li>• Operator not necessarily involved in loading</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Enter the applicant name (repeat on every page of this form)

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------



# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
800 – 8100 Granville Ave  
Richmond, BC V6Y 3T6  
Tel: 778-328-8700  
Fax: 778-328-8701  
Toll Free: 1-866-660-6011  
customerservice@itabc.ca

Asphalt Screed – Job Tasks	Declaration Response
<b>CHALLENGE TIME REQUIRED</b> The applicant has at least <b>600 hours</b> seat time operating an Asphalt Screed with your company	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>WORK SAFELY</b> <ul style="list-style-type: none"> <li>• Compliance with all regulatory requirements and established safe practices, including:               <ul style="list-style-type: none"> <li>○ Uses correct PPE</li> <li>○ Entering and exiting machine using 3-point contact</li> <li>○ Aware of traffic and traffic patterns                   <ul style="list-style-type: none"> <li>▪ Aware of no-go zones</li> </ul> </li> <li>○ Safe parking and securing of machine</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>PAVING SCREED ATTACHMENT KNOWLEDGE</b> <ul style="list-style-type: none"> <li>• When &amp; why attachments are used</li> <li>• Attachments               <ul style="list-style-type: none"> <li>○ Extensions, hydraulic wings, automatic grade controls (laser)</li> <li>○ String line vs. boom vs. ski boom</li> <li>○ Cut off shoe to narrow down joint, curb form</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>PAVING SCREED OPERATION FUNDAMENTALS</b> <ul style="list-style-type: none"> <li>• Maintain thickness, width and volume control of asphalt mix</li> <li>• Communication: paver operator and raker man</li> <li>• Anticipate adjustments and timing effect (several feet)</li> <li>• Placed on wooden blocks to null /neutralize angle</li> <li>• Aware of daily requirements of thickness for project</li> <li>• Adjust thickness to allow for percentage of compaction (approx. 20-25%)</li> <li>• Check depth frequently</li> <li>• Maintain and correct volume – not under or over</li> <li>• Team Work: Paver and screed operator</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>PAVING SCREED MAINTENANCE</b> <ul style="list-style-type: none"> <li>• Perform pre-op check               <ul style="list-style-type: none"> <li>○ Check for wear &amp; tear</li> </ul> </li> <li>• Check list (from manual)</li> <li>• Maintaining screed plate &amp; adjust               <ul style="list-style-type: none"> <li>○ Problem: scuff mark on finished product</li> <li>○ Problem: more wear</li> <li>○ Could reveal themselves in a day</li> </ul> </li> <li>• Thickness controls (screws) are manual: need grease</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>FOLLOW SHUT-DOWN PROCEDURES</b> <ul style="list-style-type: none"> <li>• Proper cleaning to prevent build up– team up with paver</li> <li>• Solvents and scraping (same for paver and in tandem) 20 mins.</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Enter the applicant name (repeat on every page of this form)

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------



# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
800 – 8100 Granville Ave  
Richmond, BC V6Y 3T6  
Tel: 778-328-8700  
Fax: 778-328-8701  
Toll Free: 1-866-660-6011  
customerservice@itabc.ca

Compact Roller – Job Tasks	Declaration Response
<b>CHALLENGE TIME REQUIRED</b> The applicant has at least <b>450 hours</b> seat time operating a Compact Roller with your company	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>WORK SAFELY</b> <ul style="list-style-type: none"> <li>• Compliance with all regulatory requirements and established safe practices – some key examples include:               <ul style="list-style-type: none"> <li>○ Uses correct PPE</li> <li>○ Entering and exiting machine using 3-point contact                   <ul style="list-style-type: none"> <li>▪ Seatbelts</li> </ul> </li> <li>○ Pinch points including between hopper and trucks                   <ul style="list-style-type: none"> <li>▪ Aware of traffic and traffic patterns</li> <li>▪ Maintaining safe distance between roller and other paving equipment (3 meters)</li> </ul> </li> <li>○ Safe parking and securing of machine</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>COMPACT ROLLER KNOWLEDGE</b> <ul style="list-style-type: none"> <li>• Machine details:               <ul style="list-style-type: none"> <li>○ Common sizes</li> <li>○ Static, vibrating and oscillating</li> <li>○ Pneumatic</li> <li>○ Combo</li> <li>○ Steel</li> </ul> </li> <li>• Determining machine production rate by size and passes</li> <li>• Drum widths &amp; weights</li> <li>• Functions:               <ul style="list-style-type: none"> <li>○ Breakdown – mix, time of year</li> <li>○ Intermediate</li> <li>○ Finish</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>COMPACT ROLLER FUNDAMENTALS</b> <ul style="list-style-type: none"> <li>• Pre-rolling considerations, including:               <ul style="list-style-type: none"> <li>○ Checks mat for grade, obstructions or limitations</li> </ul> </li> <li>• Determines number of rolls based on size of drum</li> <li>• Lines up the roller before moving onto new mat</li> <li>• Forward and reverse movements are straight and uniform</li> <li>• Stops at 30-45-degree angle</li> <li>• Achieves correct asphalt density</li> <li>• Maintains smoothness</li> <li>• Determines correct rolling patterns for the job</li> <li>• Does not cut across the mat</li> <li>• Does not stop with the vibrator feature still engaged</li> <li>• Does not leave cut marks</li> <li>• Can coordinate working training with paver and other rollers</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>BREAKDOWN ROLLER (TYPICAL CONFINED EDGE ROLLING PATTERNS)</b> <ul style="list-style-type: none"> <li>• Pre-rolling considerations, including:               <ul style="list-style-type: none"> <li>○ Lining up to move onto the new mat for first pass</li> <li>○ Creating a test strip</li> </ul> </li> <li>• Use of correct rolling pattern               <ul style="list-style-type: none"> <li>○ Each pass is correct pattern (first pass vs. preceding passes)</li> <li>○ Effectiveness of passes (operator can cover the typical pattern in three lengths of the drum with the correct amount of overlap between passes)</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Enter the applicant name (repeat on every page of this form)

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------



# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
 800 – 8100 Granville Ave  
 Richmond, BC V6Y 3T6  
 Tel: 778-328-8700  
 Fax: 778-328-8701  
 Toll Free: 1-866-660-6011  
 customerservice@itabc.ca

Compact Roller – Job Tasks	Declaration Response
<b>BREAKDOWN ROLLER (TYPICAL LONGITUDINAL JOINT PATTERN)</b> <ul style="list-style-type: none"> <li>• Pre-rolling considerations, including:               <ul style="list-style-type: none"> <li>○ Lining up to move onto the new mat for first pass</li> </ul> </li> <li>• Satisfactory and consistent use of correct rolling pattern               <ul style="list-style-type: none"> <li>○ Demonstrates typical first pass (commonly right along the joint, on the hot side, in vibratory mode)</li> <li>○ Demonstrates typical second pass (commonly overlap the cold mat by 15cm, in static mode)</li> <li>○ Each pass is correct pattern (first pass vs. preceding passes)</li> <li>○ Effectiveness of passes (operator can cover the typical pattern making sure to overlap each pass)</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>BREAKDOWN ROLLER (TYPICAL TRANSVERSE JOINT PATTERN)</b> <ul style="list-style-type: none"> <li>• Pre-rolling considerations, including:               <ul style="list-style-type: none"> <li>○ Lining up to move onto the new mat for first pass</li> <li>○ Preparing the worksite with appropriately sized boards to allow the roller to run off the mat</li> </ul> </li> <li>• Satisfactory and consistent use of correct rolling pattern               <ul style="list-style-type: none"> <li>○ Demonstrates typical first pass (commonly most of the drum is on the cold side of the joint, in static mode)</li> <li>○ Demonstrates typical consecutive passes (commonly overlap onto the hot mat by 15cm, until roller is fully on the hot mat, in static mode)</li> <li>○ Each pass is correct pattern (first pass vs. preceding passes)</li> <li>○ Effectiveness of passes (operator can cover the typical pattern making sure to overlap each pass)</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>BREAKDOWN ROLLER (TYPICAL CROWN ROLLING PATTERN)</b> <ul style="list-style-type: none"> <li>• Pre-rolling considerations, including:               <ul style="list-style-type: none"> <li>○ Lining up to move onto the new mat for first pass</li> </ul> </li> <li>• Satisfactory and consistent use of correct rolling pattern               <ul style="list-style-type: none"> <li>○ Demonstrates typical first through fourth passes (commonly starting from the outside edge and working to the middle for both sides of the crown)</li> <li>○ Each pass is correct pattern (first pass vs. preceding passes)</li> <li>○ Overlapping the crown by no more than 15cm</li> <li>○ Effectiveness of passes (operator can cover the typical pattern making sure to overlap each pass)</li> <li>○ Never straddling the crown</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>INTERMEDIATE ROLLER</b> <ul style="list-style-type: none"> <li>• Rolling considerations include:               <ul style="list-style-type: none"> <li>○ Watching for material displacement caused by the tires or drums</li> <li>○ Monitoring mat temperature</li> <li>○ Effective spacing behind the breakdown roller</li> </ul> </li> <li>• Satisfactory and consistent use of correct rolling pattern               <ul style="list-style-type: none"> <li>○ Effectiveness of passes (operator can cover the typical pattern making sure to overlap each pass)</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>FINISH ROLLER</b> <ul style="list-style-type: none"> <li>• Rolling considerations include:               <ul style="list-style-type: none"> <li>○ Watching for material displacement caused by the tires or drums</li> <li>○ Monitoring mat temperature</li> <li>○ Effective spacing behind the intermediate roller</li> <li>○ Creating a smooth surface</li> </ul> </li> <li>• Satisfactory and consistent use of correct rolling pattern               <ul style="list-style-type: none"> <li>○ Effectiveness of passes (operator can cover the typical pattern making sure to overlap each pass)</li> </ul> </li> <li>• Product is left with a smooth finish</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Enter the applicant name (repeat on every page of this form)

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------





# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
800 – 8100 Granville Ave  
Richmond, BC V6Y 3T6  
Tel: 778-328-8700  
Fax: 778-328-8701  
Toll Free: 1-866-660-6011  
customerservice@itabc.ca

Compact Roller – Job Tasks	Declaration Response
<b>ROLLER MAINTENANCE</b> <ul style="list-style-type: none"> <li>• References manuals for specific machines</li> <li>• Pre-op check</li> <li>• Checks for oil and hydraulic leaks</li> <li>• Greasing</li> <li>• Maintains sprayers</li> <li>• Maintains cleanliness of tires or drums</li> <li>• Performs winter maintenance – drain all water, replace/maintain</li> <li>• Maintains scrapers and coco mat</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>SHUTDOWN PROCEDURES</b> <ul style="list-style-type: none"> <li>• Cleaning the drums, etc.</li> <li>• Drinking water system: tanks/ hoses</li> <li>• Chock rollers</li> <li>• Foreman staging</li> <li>• Night switches/ lockouts – batteries</li> <li>• Secure for public safety</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Enter the applicant name (repeat on every page of this form)

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------



# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
800 – 8100 Granville Ave  
Richmond, BC V6Y 3T6  
Tel: 778-328-8700  
Fax: 778-328-8701  
Toll Free: 1-866-660-6011  
customerservice@itabc.ca

Raker – Job Tasks	Declaration Response
<b>CHALLENGE TIME REQUIRED</b> The applicant has at least <b>375 hours</b> seat time operating a Raker with your company	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>WORK SAFELY</b> <ul style="list-style-type: none"> <li>• Compliance with all regulatory requirements and established safe practices, including:               <ul style="list-style-type: none"> <li>○ Uses correct PPE</li> <li>○ Aware of traffic and traffic patterns                   <ul style="list-style-type: none"> <li>▪ Keeps rake handle out of traffic</li> </ul> </li> <li>○ Aware of no-go zones</li> <li>○ Aware of roller patterns</li> </ul> </li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>RAKER FUNDAMENTALS</b> <ul style="list-style-type: none"> <li>• Completes prep where machines cannot go</li> <li>• Smaller jobs: manhole leveling asphalt mix to conform to grade appurtenances (anything in the way)               <ul style="list-style-type: none"> <li>○ Repair &amp; level mistakes (done by screed or paver)</li> <li>○ Looting around</li> <li>○ Finishing a pass, removing excess &amp; squaring off edges</li> </ul> </li> <li>• Raking joints:               <ul style="list-style-type: none"> <li>○ Longitudinal or transverse centerline joint</li> </ul> </li> <li>• Stands on fringe of mat</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>PLACE ASPHALT HOT MIX</b> <ul style="list-style-type: none"> <li>• Prep road</li> <li>• Intersection, drive ways, trench patching, pothole filling or grade deviations to minimize differential compaction</li> <li>• Squaring off end of the run/mat</li> </ul>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Enter the applicant name (repeat on every page of this form)

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------



# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
800 – 8100 Granville Ave  
Richmond, BC V6Y 3T6  
Tel: 778-328-8700  
Fax: 778-328-8701  
Toll Free: 1-866-660-6011  
customerservice@itabc.ca

### E. Applicant Signature

I certify that the information I have provided is accurate. (Note: Collection and protection of personal information on this form is in accordance with the provisions of the Freedom of Information and Protection of Privacy Act.)

Applicant Name (please print):	Applicant Signature:	Date: (MM/DD/YYYY)
--------------------------------	----------------------	--------------------

*Enter the applicant name (repeat on every page of this form)*

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------



# ASPHALT PAVING/LAYDOWN TECHNICIAN

## STATUTORY DECLARATION OF WORK EXPERIENCE

ITA Customer Service  
800 – 8100 Granville Ave  
Richmond, BC V6Y 3T6  
Tel: 778-328-8700  
Fax: 778-328-8701  
Toll Free: 1-866-660-6011  
customerservice@itabc.ca

### F. References

**Minimum of Three References** must accompany **each Statutory Declaration form**. Include names and contact information of minimum three individuals who can attest to your hours and/or scope of trade. References listed must be related to the organization and period of employment listed in Section B of this form.

Each individual listed will be contacted by ITA to verify the information provided on your application.

#### 1. Reference

Relationship to Applicant:		
<input type="checkbox"/> Former Employee	<input type="checkbox"/> Contractor	<input type="checkbox"/> Supplier
<input type="checkbox"/> Co-worker	<input type="checkbox"/> Client	<input type="checkbox"/> Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference:	Language(s) that reference can communicate: (Check all that apply)	
	<input type="checkbox"/> English	<input type="checkbox"/> Other (specify):
Organization/Business Name:	Position/Title:	
Phone Number:	Email Address:	

#### 2. Reference

Relationship to Applicant:		
<input type="checkbox"/> Former Employee	<input type="checkbox"/> Contractor	<input type="checkbox"/> Supplier
<input type="checkbox"/> Co-worker	<input type="checkbox"/> Client	<input type="checkbox"/> Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference:	Language(s) that reference can communicate: (Check all that apply)	
	<input type="checkbox"/> English	<input type="checkbox"/> Other (specify):
Organization/Business Name:	Position/Title:	
Phone Number:	Email Address:	

#### 3. Reference

Relationship to Applicant:		
<input type="checkbox"/> Former Employee	<input type="checkbox"/> Contractor	<input type="checkbox"/> Supplier
<input type="checkbox"/> Co-worker	<input type="checkbox"/> Client	<input type="checkbox"/> Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference:	Language(s) that reference can communicate: (Check all that apply)	
	<input type="checkbox"/> English	<input type="checkbox"/> Other (specify):
Organization/Business Name:	Position/Title:	
Phone Number:	Email Address:	

Enter the applicant name (repeat on every page of this form)

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
-------------------	-----------------------	------------------