## Form 6A Verification of on the Job Experience

## **PLEASE PRINT CLEARLY**

Apprentice/Tradesperson		PSE#/MyATC#		
Current Address	City	Postal Code	Phone	Number
Employer (Firm Name)		Name and Certificate Number of Supervising		Journeyperson
, , ,				
Address of Employer	City	Postal Code	Phone Number	
Address of Employer	City	rostal code	r ostar code	
Car Citta				
Gasfitter				<b>Trade Time</b>
Period of Employment	to			Exposure In
(DD/MN		D/MM/YY)		Hours
Type of Work (please print)				
Rough-in: sizing piping and tubing; pipe and tube jointing, supporting, installing and pressure				
testing; verification tagging	pipe and tube jointing, so	apporting, mataning and pres.	Suic	
Installation of appliances: placing, hanging and supporting according to prints, specs, codes				
and manufacturer's specifications;	gas connections			
Venting: calculating combustion air requirements; sizing, hanging and supporting according to				
code and manufacturer's specifications				
Start-up procedures: leak testing; test-fire procedures (pressure, venting, temperature rise,				
limit devices, etc.); explanation of operating procedures to end users				
<b>Servicing:</b> general and scheduled maintenance; trouble-shooting; inspection of combustion air and venting systems; confirmation of appliance system operations including components such				
as combustion chamber and limit d		ations including components	Jack	
		Total	Hours	
I Certify The Above Hours Are Accurate		<del></del>		
	Date (DD/MM/YY)	Apprentice/Tradespers	son (signatu	re)
LCouls The Alexandra Assault				
I Certify The Above Hours Are Accurate	Date (DD/MM/YY)	Employer Representative (signature)		
	bate (bb/titti)	p.o yeep. eseac	(3.8	,
		Employer Representat	ive (print na	ame clearly)
For Commission Use Only				
Time Assessed:	_Approved By:	Date		(DD/MM/YY)

Revised October/23

