

CLASS I or CLASS II PROOF OF EXPERIENCE AFFIDAVIT FOR CONSTRUCTION LICENSE

Applicant's Name:	Certificate Category Requested:	

The applicant is seeking a St. Johns County Certificate of Competency in the trade indicated above. As part of the application for this certificate, the applicant must verify his/her experience within this trade. You are being requested to provide information that will aid the applicant in meeting this requirement. You should verify time of active experience working as an apprentice or a skilled worker (e.g., as a worker commanding the wage of mechanic or better in the trade). Time served solely in a supervisory or administrative role should be described, but may or may not be considered sufficient to demonstrate required trade experience. The License Holder verifying trade experience for the above-named applicant must provide the following information: (Use separate sheet if necessary)

Name:	Title:		
Business Name:			
	License No		
Business Address:			
Street	City/State	Zip Code	
The applicant was employed by me from	to		
Applicant's title(s):			
The applicant's scope of work (specific duties) inclu-			
Additional Comments:			
NOTE TO LICENSED CONTRACTORS: Under penalty	of perjury, I declare that the facts s	stated here are true.	
Signature of Affiant	Date	Date	
STATE OF FLORIDA COUNTY OF ST. JOHNS			
NOTARY as to Contractor Signature above:			
Sworn to or affirmed and subscribed before me th	is day of	20	
Notary Signature	Commission Number &	Commission Number & Expiration Date	

Building Department

4040 Lewis Speedway, St. Augustine, FL 32084

904.827.6800 | www.sjcfl.us

T:Contractor Licensing\2.024 Licensing Forms\2.024 Class I.II Experience Aff.docx