

PTI Certification of Field Personnel for Bonded Post-Tensioning Field Work Affidavit

APPLICANT INFORMATION

NAME		
HOME STREET ADDRESS		
CITY	STATE	ZIP
TEL. NO. ()	E-MAIL	

FIELD WORK HISTORY (COPY ADDITIONAL PAGES FOR EACH EMPLOYER)

EMPLOYER OR APPRENTICESHIP PROGRAM		
ADDRESS		
CITY	STATE	ZIP
TEL. NO. ()	FAX ()	
DATE OF EMPLOYMENT	from:	to:
APPROXIMATE NUMBER OF PROJECTS OR STRUCTURES WORKED ON:		

APPLICANT CERTIFICATION

*I hereby certify that all of the information on this affidavit is true and correct. I authorize PTI to contact the above listed employer and the project verifiers to substantiate the work experience being claimed. I understand that falsifying information on this document could result in **revocation of my PTI Certification(s)**.*

APPLICANT'S SIGNATURE

DATE

PROJECT HISTORY

PROJECT TITLE / LOCATION (CITY/STATE)		
HOURS WORKED WITH PT ON THIS PROJECT		
DESCRIPTION OF WORK PERFORMED		
<p><i>I hereby certify that I have personal knowledge that the above named applicant has completed the number of hours claimed above on this bonded post-tensioning project. I am certifying this as either the applicant's supervisor or as the applicant's apprenticeship supervisor.</i></p>		
VERIFIER #1: PRINT NAME / TITLE	VERIFIER #1: SIGNATURE	
VERIFIER #1 EMAIL	PHONE#	DATE
<p><i>I hereby certify that I have personal knowledge that the above named applicant has completed the number of hours claimed above on this bonded post-tensioning project. I am certifying this as either the applicant's supervisor or person in responsible charge of the project.</i></p>		
VERIFIER #2: PRINT NAME / TITLE	VERIFIER #2: SIGNATURE	
VERIFIER #2 EMAIL	PHONE#	DATE

PTI Certification of Field Personnel for Bonded Post-Tensioning Field Work Affidavit (cont.)

Applicant's Name: _____

PROJECT HISTORY

PROJECT TITLE / LOCATION (CITY/STATE)			
HOURS WORKED WITH PT ON THIS PROJECT			
DESCRIPTION OF WORK PERFORMED			
<i>I hereby certify that I have personal knowledge that the above named applicant has completed the number of hours claimed above on this bonded post-tensioning project. I am certifying this as either the applicant's supervisor or as the applicant's apprenticeship supervisor.</i>			
VERIFIER #1: PRINT NAME / TITLE		VERIFIER #1: SIGNATURE	
VERIFIER #1 EMAIL	PHONE#	DATE	
<i>I hereby certify that I have personal knowledge that the above named applicant has completed the number of hours claimed above on this bonded post-tensioning project. I am certifying this as either the applicant's supervisor or person in responsible charge of the project.</i>			
VERIFIER #2: PRINT NAME / TITLE		VERIFIER #2: SIGNATURE	
VERIFIER #2 EMAIL	PHONE#	DATE	

PROJECT HISTORY

PROJECT TITLE / LOCATION (CITY/STATE)			
HOURS WORKED WITH PT ON THIS PROJECT			
DESCRIPTION OF WORK PERFORMED			
<i>I hereby certify that I have personal knowledge that the above named applicant has completed the number of hours claimed above on this bonded post-tensioning project. I am certifying this as either the applicant's supervisor or as the applicant's apprenticeship supervisor.</i>			
VERIFIER #1: PRINT NAME / TITLE		VERIFIER #1: SIGNATURE	
VERIFIER #1 EMAIL	PHONE#	DATE	
<i>I hereby certify that I have personal knowledge that the above named applicant has completed the number of hours claimed above on this bonded post-tensioning project. I am certifying this as either the applicant's supervisor or person in responsible charge of the project.</i>			
VERIFIER #2: PRINT NAME / TITLE		VERIFIER #2: SIGNATURE	
VERIFIER #2 EMAIL	PHONE#	DATE	

TOTAL FIELD WORK HOURS SUBMITTED

<i>Required experience for Level 2 Bonded PT: 1500 hours in Bonded PT</i>	
Total Number of Hours Worked Placing Bonded PT (500 Required)	
Total Number of Hours Worked Stressing Bonded PT (500 Required)	
Total Number of Hours Worked Grouting Bonded PT (500 Required)	

(COPY ADDITIONAL PAGES AS NEEDED)