

PLANT OPERATING EXPERIENCE (1026 FORM)

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Note: Any personal information collected is handled in accordance with the British Columbia *Freedom and Protection of Privacy Act*. If you have questions about the collection, use, or disclosure of this information, contact the Records, Information and Privacy Analyst for the Technical Safety BC at 1-866-566-7233.

Plant Address: _____

Telephone No.: _____

Employee(Applicant): _____

**Current Certification
(if applicable):** _____

**Technical Safety Cert.
No.:** _____

Date of Issue*: _____

- Notes:**
1. A separate Plant Operating Experience form must be submitted from each employer.
 2. When experience as a **Process Operator** is being claimed as qualifying time, a resume of the type of equipment operated and the duties and responsibilities of the operator must accompany this form. The resume must be signed by the Chief Engineer or a company Official.
 3. A **Power Engineer Trainee** is a person who has assisted in the operation of a plant but does not hold a certificate of qualification. (6 months for 4th class & Refrigeration Operator, 4 months for 5th class boiler. 1 month's experience for Ice Facility Operator.)
 4. **Acceptable Experience** gained in the operation, design, construction, repair or maintenance of equipment to which the PEBPV and Refrigeration Safety Regulations applies must be covered by a separate testimonial.
 5. For plant classification, see PEBPV and Refrigeration Safety Regulations, part 1, Div. III.

To be completed by Chief Engineer or Company Official

From			To			Plant Size	Boiler W.P.	Plant Classification (see note 5)	Chief Eng.	Asst. Chief Eng.	Shift Eng.	Asst. Shift Eng.	Asst. Eng.	Process Operator (see note 2)	Power Eng. Trainee (see note 3)	Acceptable Experience (see note 4)	
DD	MMM	YYYY	DD	MMM	YYYY												KW/ M ²
State the experience gained while in possession of current certification Note: The start date cannot be earlier than Date of Issue* of the current certification								Eg. 1 st , 2 nd , 3 rd , 4 th , 5 th , Refrigeration									

Name of Chief Engineer/Company Official: _____ Signature of Chief Engineer/Company Official: _____

Title: _____ Phone No.: _____ Date: _____

Notice: It is an offence under section 72 (1)(f) of the BC Safety Standards Act to knowingly provide false information on this form.

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