



MOBILE CRANE OPERATOR – HYDRAULIC 80 TONNES AND UNDER

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

To qualify to challenge certification in this trade, you must:

- Have experience performing all of the tasks listed in Section E

This form is used to declare work experience for periods of employment. The information provided is used to verify the applicant’s work experience in this trade. This form must be completed by a **direct supervisor of the applicant** who will be contacted by the BC Association for Crane Safety (BCACS) or ITA.

Note: An Employer Declaration of Work Experience form must be completed by each Employer listed on the applicant’s completed Application form. A Statutory Declaration of Work Experience form must be completed for periods during which the applicant was self-employed or a previous employer is unavailable to complete an Employer Declaration. For more information, see **Instructions for Certification Challenge**.

Once your challenge application is approved, you must pass the ITA Certificate of Qualification Exam before attempting the practical assessment. The written exam is administered by ITA and the practical exam is administered by the Fulford Harbour Group on behalf of ITA. You must pass both to receive certification.

For more information on fees and scheduling of the written exam, refer to the **Instructions for Certification Challenge**. For more information on fees and scheduling of the practical exam, and to download the practical exam application form, see the Fulford Harbour Group website at www.fulford.ca.

A. Applicant Name

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
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B. Supervisor or Self-Employment Contact Information

Enter the contact information for the Supervisor at your previous employer who is unavailable to complete an Employer Declaration, or for your own business if you are self-employed.

Name of Organization/Employer/Business:		Supervisor Name:	Supervisor’s Position/Title:
Suite Number:	Street Number and Name:		
City:		Province:	Postal Code:
Telephone Number: ()		Email Address:	Business Registration Number: (Self-Employment only)



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C. Employment or Self-Employment Information of Applicant

Enter the dates and number of hours for this period of employment or self-employment. Combine multiple periods of self-employment on one form, but separate periods of employment with different employers on separate forms.

Dates of Employment (MM/DD/YYYY): From: _____ To: _____		Total Number Hours of Mobile Crane Operator – Hydraulic 80 Tonnes and Under Experience Accumulated in that Period:
Job Title of Applicant:		

D. Reason for Statutory Declaration

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

- Applicant was self-employed
 Employer will not complete Employer Declaration
 Employer is no longer in business
 Employment records are not available

Applicants must attempt to contact current or previous employers to request an Employer Declaration. 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).

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E. Statutory Declaration of Job Task Performance

By checking “Yes” or “No” in the Declaration Response column, indicate whether or not you have performed the job tasks listed below. Cross out any job tasks you did not perform during the period indicated in Section C.

Job Tasks	Declaration Response	
	Yes	No
Safety		
Demonstrate knowledge of safe working practices for crane operators		
Demonstrate knowledge of power line hazards and high voltage equipment		
Comply with WorkSafeBC Occupational Health and Safety Regulation (OHSR)		
Communications		
Demonstrate knowledge of personnel involved in crane operations		
Demonstrate knowledge of hand signals		
Demonstrate knowledge of radio communications		
Demonstrate knowledge of workplace communications		
Use hand signals in the workplace		
Use radio communications in the workplace		
Communicate information clearly and check for understanding in the workplace		
Cranes		
Demonstrate knowledge of types of cranes and classifications		
Demonstrate knowledge of terminology related to craning and craning concepts		
Demonstrate knowledge of hoisting terminology, functions and systems		
Demonstrate knowledge of regulatory requirements pertaining to cranes		
Demonstrate knowledge of crane components and attachments		
Demonstrate knowledge of engines and ancillary systems		
Demonstrate knowledge of power transfer		
Use crane components and attachments for mobile cranes in the workplace		

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Job Tasks	Declaration Response	
	Yes	No
Rigging and Lifting Theory		
Demonstrate knowledge of lifting theory and forces		
Demonstrate knowledge of slings (all types), rigging hardware, materials, inspection and capacity cards		
Demonstrate knowledge of wire rope hoist line construction and inspection		
Use rigging hardware and tools in the workplace		
Hoisting Fundamentals		
Demonstrate knowledge of determining load weights using fundamental math functions and calculations		
Demonstrate knowledge of determining the capacity of a crane using load charts		
Interpret load charts and load study drawings to configure crane for workplace operation		
Transportation and Delivery		
Demonstrate knowledge of BC Ministry of Transportation – Commercial Transport rules and regulations		
Demonstrate knowledge to assemble, set up to operate and disassemble a mobile crane at a worksite		
Prepare and transport a mobile crane to a worksite following all highway and traffic rules and regulations		
Assemble, set up to operate and disassemble a mobile crane at a worksite		
Demonstrate knowledge to prepare a mobile crane for transport and/or travel		
Site Planning and Crane Positioning		
Demonstrate knowledge of accurate site assessment tools		
Demonstrate knowledge to locate and safely position a crane		
Conduct an accurate site assessment and safely position a crane in the workplace		

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Job Tasks	Declaration Response	
	Yes	No
Crane Operations		
Demonstrate knowledge of pre-operational requirements in crane operations		
Demonstrate knowledge of crane operations		
Demonstrate knowledge of lifting plans and rigging for cranes		
Demonstrate knowledge to leave a mobile crane unattended		
Demonstrate knowledge of mobile hydraulic crane 80 tonnes and under load charts and load calculations		
Conduct pre-operational inspections of mobile cranes and equipment in the workplace		
Conduct safe crane set-up according to manufacturer's specifications		
Operate a mobile hydraulic crane 80 tonnes and under to lift and place loads in the workplace		
Leave a mobile crane unattended		
Maintenance and Service		
Maintain an equipment logbook to retain a permanent written record of maintenance and repairs		
Demonstrate knowledge of inspecting engines, monitoring devices and hydraulic systems		
Demonstrate knowledge of servicing and maintenance procedures		
Complete mobile crane maintenance checklists (engine on/engine off) and maintain engines to manufacturer's specifications		
Perform routine inspections and maintenance of hydraulic systems on mobile cranes		
Inspect monitoring devices and control mechanisms on mobile cranes		
Perform service on engine cooling systems on mobile cranes		

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F. Confirmation of Prerequisite Credentials or Certificates

For some trades, evidence that the applicant has earned prerequisite credentials or certificates is required before the individual is permitted to challenge certification. For those trades, you must prove you have the required prerequisite credentials. Prerequisite credentials for this trade are listed below.

- There are no prerequisite credentials or certificates for this trade.

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

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H. References

References must accompany all Statutory Declarations. Include with your completed Statutory Declaration the names and contact information of three individuals who can verify your self-declared work experience in this trade. This may include suppliers (maximum one), former employees (maximum one), contractors, or regular, long-term clients (maximum one).

Each individual listed will be contacted by the Industry Training Organization (ITO) responsible for this trade or ITA to verify the information provided on your application.

1. Reference

Legal Last Name of Reference:	Legal First Name of Reference:
Organization/Business Name:	Position/Title:
Business Phone Number:	Reference Cell Number:
Relationship to Applicant:	Email Address:

2. Reference

Legal Last Name of Reference:	Legal First Name of Reference:
Organization/Business Name:	Position/Title:
Business Phone Number:	Reference Cell Number:
Relationship to Applicant:	Email Address:

3. Reference

Legal Last Name of Reference:	Legal First Name of Reference:
Organization/Business Name:	Position/Title:
Business Phone Number:	Reference Cell Number:
Relationship to Applicant:	Email Address:

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

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