



Affidavit of Experience for Washington Registered Electrical Apprentices

Apprentice Responsibilities:

Mail your original affidavit to the address on this form:

No copies of copies. No email. No faxes. Keep a copy for your records.

To report hours worked as a Washington Trainee before becoming a Washington Registered Apprentice, use L&I form: [F500-149-000](https://www.lni.wa.gov/Forms/500-149-000)

Mail to: L&I Electrical Program
PO Box 44460
Olympia WA 98504-4460

No fee required. No deadlines for submission.

Learn more:
<https://www.lni.wa.gov/ElectricalExamInfo>

Affidavit: Please print clearly in ink. Make no omissions, errors, or alterations. Mail the original copy to the address above

I, _____ of _____, _____
Name of Apprenticeship Training Director/Authorized Signer Name of WSATC Approved Apprenticeship Program Program ID

attest and certify _____, _____,
Name of Washington Registered Apprentice L&I Training Certificate #

Was supervised in accordance with RCW 19.28 and WAC 296-46B from _____ to _____
MM/DD/YYYY MM/DD/YYYY

while engaged in the electrical construction trade for the number hours in WAC [296-46B-920](#) categories below.

Only claim hours worked by the Apprentice named above while they were registered in the Apprenticeship Program named above.

Hours	Category	(75% supervision required)	Hours	Category	(100% supervision required)
_____	(01)	Commercial or Industrial	_____	(03A)	Domestic Well
_____	(02)	Residential	_____	(06B)	HVAC/Refrigeration – Restricted
_____	(03)	Pump and Irrigation	_____	(07A)	Non-Residential Lighting Maintenance
_____	(04)	Signs	_____	(07B)	Residential Maintenance
_____	(06)	Limited Energy System	_____	(07C)	Restricted Non-Residential Maintenance
_____	(06A)	HVAC/Refrigeration	_____	(07D)	Appliance Repair
_____	(07)	Non-Residential Maintenance	_____	(07E)	Equipment Repair
			_____	(10)	Door, Gate, and Similar Systems

Signature — Sign below in the presence of a Notary Public

I hereby certify that the information on this affidavit is true and accurate. I acknowledge that the department may issue citations for false statements or material misrepresentation or other violations per RCW 19.28 and WAC 296-46B.

X
Signature of Apprenticeship Training Director/Authorized Signer

Signed before me on _____
MM/DD/YYYY
X
Signature of Notary Public
Residing in _____

For L&I Use – Transaction ID and Date Stamp Field

Notary Stamp or Seal below must be affixed in ink and be capable of being photocopied. Electronic notarization accepted.