

Seattle Department of Construction and Inspections Trades Licensing 700 5<sup>th</sup> Avenue, Suite 2000 P. O. Box 34019 Seattle, WA 98124-4019 Ph: (206) 684-5174 Fax: (206) 386-4039

## AFFIDAVIT

Must be completed and attached to each application for Journeyman Refrigeration Mechanic licenses

 Applicant's Name:
 Customer #:

Check the applicable boxes below:

I, certify that I am personally/professionally acquainted with	□ Installed, altered, extended, and repaired gas piping installations. Describe work:
and his/her work at (Company name and address):	Materials Used:
	<ul> <li>Black Iron</li> <li>Copper</li> </ul>
Period From: To:	<ul> <li>Corrugated Stainless Steel</li> </ul>
Signature:	□ Plastic
Printed Name:	□ Other, describe:
Title:	
Phone#:	
□ Installed refrigeration system (not self-contained).	Comments:
Describe work:	
Mfr:	
Sys. Size:	
Hrs/week:	