



South Carolina Department of Labor, Licensing and Regulation
South Carolina Residential Builders Commission

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**RESIDENTIAL HVAC INSTALLER AND REPAIRER
EXPERIENCE AFFIDAVIT INSTRUCTIONS**

The Commission verifies experience by applicants submitting documentation from previous or current supervisors or employers. The attached Experience Affidavit is to be completed by each of the applicant's employers/supervisors to verify the applicant's experience; however, if you are applying for licensure by exam waiver due to being appropriately licensed in this state or another eligible state, you may complete the Experience Affidavit to self-report your experience under your own license.

Employer/Supervisor: Please fill out the attached Residential HVAC Installer and Repairer Experience Affidavit, attesting to the applicant's experience/ability to install, replace, alter, and repair HVAC systems. The Commission is looking for, preferably, hands-on experience.

All completed Experience Affidavits should be included with the initial application package.

Information and Instructions:

- Providing proof of required experience ensures a timely review of the application. Failure to provide adequate experience verification may result in a delay in a determination regarding the application. It is imperative for the applicant and supervisor (experience verifier) to ensure all forms are accurate and complete.
- The Commission may contact individuals to verify the listed experience. All contact information listed on the form should be up to date and the individual completing the form must have been appropriately licensed during the dates of supervision. Examples of appropriate licensure include, without limitation: licensed residential HVAC installer and repairer, residential builder, or mechanical contractor (AC or PK classification).
- A separate form should be submitted for each employer/ supervisor. The employer/supervisor must have been appropriately licensed (see above) during the dates of supervision and must have direct knowledge of the applicant's work experience.
- In addition to the attached form, the applicant must provide proof of employment history (i.e., copies of W2's and/or 1099s) with their application packet.
- The Experience Affidavit is a fillable document. It should be downloaded and saved to a computer before completing. Completed affidavits must be legible to be considered.



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**RESIDENTIAL HVAC INSTALLER AND REPAIRER
EXPERIENCE AFFIDAVIT**

This form is a fillable document. You should download and save to a computer before completing.

All Experience Affidavits should be submitted with the initial application for licensure.

Applicant's Name ("Applicant"): _____

IMPORTANT: All sections below must be completed by the employer/supervisor. The individual completing the form must have been appropriately licensed during the dates of supervision and must have direct knowledge of the applicant's work experience. Examples of appropriate licensure include, without limitation: licensed residential HVAC installer and repairer, residential builder, or mechanical contractor (AC or PK classification). Falsification of information may be grounds for disciplinary action against a licensee. You may be requested to provide documentation to verify all experience to which you are attesting.

EMPLOYER/SUPERVISOR INFORMATION

Supervisor Name: _____ Company Name: _____
(if applicable)

Job Title: _____ Address: _____

Phone: _____ Email: _____

State of Licensure: _____ License Type: _____ License Number: _____

Date of initial license: _____ Exp. Date: _____ Status of License: _____

APPLICANT'S WORK EXPERIENCE

Please check the box that identifies the level of work performed by the individual above (applicant):

Supervisor Foreman Journeyman Contractor Employee Other: _____

Dates of Supervision: _____ Employment Type: _____ Hrs. per week: _____
MM/YY – MM/YY Full-time / Part-time

Please identify which of the following trades the individual (applicant) performed while under your supervision and approximately how many projects they performed under each trade:

Estimating, Bidding and Plan Review: Cost estimating, preparing quotes, and plan review for projects
Approximately how many projects: _____

Ductwork Fabrication & Installation: Measuring, cutting, assembling, sealing, and hanging
Approximately how many projects: _____

Manual J, S, & D Load Calculations: Perform load calculations, equipment selection and duct design
Approximately how many projects: _____

Gas Piping: Installing and testing natural gas piping and connections
Approximately how many projects: _____

Equipment Installation: Air handlers, heat pumps, condensers, mini-splits, furnaces, heaters, and packaged units

Approximately how many projects: _____

Service Call Work: Troubleshooting and repairing systems

Approximately how many projects: _____

Please identify any additional trades the individual (applicant) performed while under your supervision:

Refrigeration & Brazing: Copper line set fabrication, brazing/soldering, and leak testing

Electrical Work (low and high voltage): Wiring thermostats, controls, disconnects, and breakers

Condensate & Drainage Systems: Routing and trapping condensate lines properly

Airflow Balancing & Testing: Static pressure checks, airflow measurements, and balancing registers

System Startup & Commissioning: Verifying refrigerant charge, airflow, and controls operation

Thermostat Installation & Programming: Basic to smart thermostats

Insulation: Insulating ducts, refrigerant lines, and plenums

Other: _____

Please provide any additional information regarding this applicant's experience that you believe would be helpful for the Commission to consider.

Do you feel this applicant has the knowledge and experience necessary to independently perform full-scope HVAC work on an entire home?

YES NO

If not, please explain:

SUPERVISOR ATTESTATION

I swear or affirm under penalty of perjury that the information provided in this Affidavit is true and correct to the best of my personal knowledge, and that the Applicant did perform the above-described work under my supervision.

Supervisor's Signature: _____ Date: _____

Sworn to and subscribed me this _____ day of _____, 20 ____.

Notary Signature: _____

Print Notary Name: _____

{Seal}

Notary Public for the State of: _____

Commission Expiration Date: _____