



# ARIZONA REGISTRAR OF CONTRACTORS



Douglas A. Ducey, Governor

Jeff Fleetham, Director

## EXPERIENCE VERIFICATION FORM

### FIRST-HAND KNOWLEDGE REQUIRED

The individual verifying the Qualifying Party's work experience (the "[Verifier](#)") must have direct, first-hand knowledge of the Qualifying Party's work as described on the Experience Verification Form. **Note:** The Verifier cannot be a person named on the license application.

### INSTRUCTIONS

Under A.R.S. § 32-1122(E), a license will not be issued unless the Qualifying Party meets statutory work experience requirements. The Registrar verifies a Qualifying Party's experience by requiring the Qualifying Party to submit documentation specifying:

- 1) Projects on which the Qualifying Party performed work; and
- 2) The Qualifying Party's experience in the contracting field.

### Description of Duties

To complete the "Description of Qualifying Party's Main Duties" in [Box 12](#) of this Experience Verification Form, you should provide as much of the following information as possible:

#### For All Applications:

- Qualifying Party's general roles and responsibilities;
- Specific trades and crafts performed by Qualifying Party, or by other individuals supervised by the Qualifying Party; and
- Types of systems installed by Qualifying Party.

#### Additional Information For General Contractor Applications:

- Number and type of subcontractors managed by the Qualifying Party; and
- Types of systems installed by subcontractors supervised by the Qualifying Party.

#### Specific Requirements for Dual License Applications

- If you are applying for a dual-license, you must include experience for both **commercial** and **residential** projects.

#### WARNING:

- Providing false information in the Experience Verification Form will result in denial of the License Application.
- The Registrar will verify the information provided within this Form.
- The Qualifying Party is responsible for the truthfulness of all information contained in the Experience Verification Form.



**\*\*\*DO NOT SUBMIT THESE INSTRUCTIONS WITH YOUR APPLICATION\*\*\***

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Form RC-L-200E

Rev 11/10/17



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## Form RC-L-200E

## EXPERIENCE VERIFICATION FORM

### Number of Years of Experience

Inadequate project experience or failure to provide proof of adequate experience may result in the delay or denial of a license application.

- The Qualifying Party must complete as many Experience Verification Forms as are required for the desired license classification.
- The required number of project verifications can be determined by referring to the [License Classification Requirements](#) table.
- Technical training, military service, diplomas, or certifications may be submitted to substantiate experience, or a portion of experience.

1. Name of Qualifying Party		2. Business Name of Employer	
3. State Where Employer is Licensed	4. Employer's Contractor License Number	5. Employer's License Classification and Description	
6. Date Employment Started	7. Date Employment Ended	8. Average Hours Worked Per Week	

### POSITIONS HELD BY QUALIFYING PARTY WITH THIS EMPLOYER

Provide the requested information for each position the Qualifying Party held with this employer.

9. Position(s)	10. Duration (Years/Months)	11. Size of Projects (Square Foot and/or Dollar Amount)
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12. Description of Qualifying Party's Main Duties (see [instruction cover sheet](#) for additional details)

### Instructions for the Verifier

The Verifier must complete this section, and return this form to the Qualifying Party. **Note: The Verifier cannot be a person named on the license application.**

13. Verifier's Name		14. Verifier's Title	
15. Verifier's Mailing Address		City	State
16. Verifier's Phone Number		17. Verifier's Email	

### SIGNATURE

By signing below, I certify that I have direct knowledge of this Qualifying Party's work covering the time period outlined in Part I of this Experience Verification Form. I certify that I have reviewed the entire contents of this Experience Verification Form and the information provided is true and accurate.

\_\_\_\_\_  
Print Verifier's Name

\_\_\_\_\_  
Verifier's Signature

\_\_\_\_\_  
Date

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