EV98 QUALIFYING PARTY CERTIFICATE APPLICATION INSTRUCTIONS

Every license must have at least one Qualifying Party (QP) for each classification of work covered by the license. This is the person who has the requisite experience, and who takes & passes the required exam(s).

IMPORTANT NOTE: If you are uncertain of the proper classification, please complete a "Classification Determination Request form" and submit it to PSI along with a detailed description of the work to be performed. Forms are available online at *public.psiexams.com*.

ONE: Complete packet. AN EV98 QUALIFYING PARTY APPLICATION packet must include:

1. Complete, legible, **signed, and notarized** Qualifying Party application.
2. Complete, legible**, signed, and notarized** Work Experience Affidavit(s).
    a. Use one form per employer/affiant verifying your experience or hours.
    b. Use the Elevator Work Experience verification form.
    c. Individuals who are qualified to complete the Affidavit are as follows: Employers (past or present), Supervisors, Foremen, other Contractors. DO NOT LEAVE ANY BLANKS.
    d. All experience must have been gained while employed by a contractor licensed in the trade being applied for or considered legal work in the state in which the work was performed.
        i. There are some limited exceptions to the work experience requirements. Military, out of the country, and homeowner experience may be used in some circumstances. Please contact PSI for more information on these exceptions.
    e. All qualifying parties must have the required experience for the specific classification(s) of work the license will cover. Work experience requirements are FOUR YEARS (8,000 hours) for EV98.

NAEC Certified Elevator Technician Training (CETT) or
International Union of Elevator Constructors (IUEC) with mechanic's card
Completion of one of these programs qualifies you to take the EV98 exam. You must provide a copy of your Certificate or Card. A Work Experience Affidavit is not required. The exam is still required.

3. There is an application fee of $30.00 and a Certificate fee of $6.00.
4. A self-addressed stamped envelope (letter-size) with sufficient return postage. This envelope will be used to send your application packet back to you if your submission is rejected.

HELPFUL TIP: Have your experience verification form completed and notarized in duplicate. Keep an original signed and notarized form in your files. This will be useful if you need to reapply.

TWO: Complete packets must be delivered by hand or mail to:

PSI 9550 SAN MATEO BLVD NE, STE F Albuquerque, NM 87113

If your packet is incomplete, incorrect, or insufficient, it will be returned to you.

THREE: After your application has been accepted, your experience has been verified, and your eligibility is cleared, you will be notified by email that you have been approved to test.

FOUR: Once you have been approved to test, you must pay for, schedule, take, and pass the required exams*. You may schedule your tests by calling PSI at 877-663-9267, or online at psiexams.com. Each exam requires a separate fee.

* In addition to trade specific exams, if required, **all** new QP applicants must take and pass the Business & Law test offered by PSI **or** take an **approved** Business & Law course and receive a completion certificate. Check *public.psiexams.com* for an approved list. Neither the State of New Mexico nor PSI sponsors these schools.

FIVE: After you have passed the required exams/Business & Law course, you must submit passing score reports/completion certificates along with a Contractor License Application or a Status Change Form.

- All requirements for certification must be met within **six months** from the date PSI approves your application and affidavit, or your application fees will be forfeited. If your approval to test has expired, you must submit an extension request to extend your approval, including fees, *even if your test scores are within one year*. **A qualifying party can only be attached to a contractor's license if they have an active approval.** *See Question 3(a) for extension*
- Exam scores are valid for **one year**.

NOTE: All Qualifying Party certificates are valid indefinitely if they are attached to an active license. Once detached from a license, a Qualifying Party Certificate will automatically cancel if not reattached to a license within two consecutive years and the individual will have to reapply and retest.

QUALIFYING PARTY CERTIFICATE APPLICATION

AN INCOMPLETE, INCORRECT, OR OTHERWISE DEFECTIVE APPLICATION
WILL NOT BE PROCESSED.

PLEASE PRINT CLEARLY. USE ALL CAPITAL LETTERS.
If you need to CHANGE an answer, please circle the CORRECT answer and initial the change

1. **APPLICANT INFORMATION:** **Note: If provided, the middle name will be printed on the license and certificate. Long names may affect document formatting.**

_____
TODAY'S DATE (MM/DD/YYYY)

_____ _____ _____
FIRST NAME **MIDDLE NAME (OPTIONAL)** **LAST NAME**

_____
MAILING ADDRESS

_____ _____ _____ _____
CITY **STATE** **ZIP CODE** **DATE OF BIRTH (MM/DD/YY)**

_____-_____-_____ _____ _____
SOCIAL SECURITY NUMBER **DAYTIME PHONE** **ALTERNATIVE PHONE**

Email_____

2. **APPLICANT HISTORY:**

a. Are you applying for an **EXTENSION** for our approval to test? _____**NO** _____**YES**

b. Have you previously been a Qualifying Party for a licensed **New Mexico** contractor? _____**NO** _____**YES**

If "yes" provide the following information. Please attach separate sheets, if necessary.

Company Name: _____

NM License _____ Dates: _____/____ to _____/_____

c. Have you completed the **NAEC CETT program**? If "yes", attach a copy of the current certificate. *(Work Verification Form is not required).* _____**NO** _____**YES**

d. Have you completed the **IUEC program and hold a mechanic's card**? If "yes", attach a copy of the current certificate/card. *(Work Verification Form is not required).* _____**NO** _____**YES**

e. If you are a New Mexico certified Journeyman, provide the following information: _____**NO** _____**YES**

Classification Code: _____ Certificate Number _____

f. Are you current with child support regulations in New Mexico? _____**Not Applicable** _____**NO** _____**YES**

g. Have you performed work in the last 12 months outside the scope of your classification(s)? _____**NO** _____**YES**

h. Are there any unpaid judgments against you from any state? _____**NO** _____**YES**

i. Do you have any outstanding fines with CID? _____**NO** _____**YES**

j. Do you have any outstanding permit fees with any jurisdiction? _____**NO** _____**YES**

OFFICIAL USE ONLY:
DATE: _____/_____/_____ AMOUNT $_____ MC____VISA____AMEX____DISC____CK____CK# ___-_____
APPROVAL IS VALID UNTIL: / / BY:

k. Do you have any unresolved complaints with CID or in any other state? _____**NO** _____**YES**

l. Has your license or certificate ever been revoked in any other state? _____**NO** _____**YES**

m. Have you ever been convicted of a disqualifying felony pursuant to NMAC 14.6.3.8 F? _____**NO** _____**YES**

n. Are you licensed or a qualifying party in any other state? Please provide documentation _____**NO** _____**YES**

If you have answered "yes" to g-m, or "no" to f, please submit a detailed explanation with documentation.

3. AFFIRMATION AND SIGNATURE

I hereby affirm, under penalty of perjury, that all information provided in this application is true and correct to the best of my knowledge. I understand that any false statement by me in this application may result in administrative action against any license or certification issued on the basis of this application. I further acknowledge that I am required to *immediately* notify PSI, in writing, of any material change in my status of the licensee, qualifying party (including without limitation change of address, change of qualifying party, change of licensee name or legal entity, change of authorized contact), and failure to do so can result in administrative action up to and including revocation of the license or certificate affected by the change.

Applicant Signature _____

Please print your full name_____

Date_____, 20_____

4. NOTARY

County of _____

State of _____

Subscribed and sworn before me this _____day of _____20_____.

_____ SEAL

Notary Public

My commission expires _____, 20_____

5. **PAYMENT:** An application fee of $30 PLUS a certificate fee of $6.00 is required to be submitted with the application.

Submit Application Packet and Payment to (by walk-in or mail):
PSI, 9550 SAN MATEO BLVD NE, STE F Albuquerque, NM 87113
(877) 663-9267 *public.psiexams.com*

➡ Payments may be made by credit card or money order payable to PSI.

ALL SUBMISSIONS MUST INCLUDE ORIGINAL DOCUMENTS. YOU MAY NOT SUBMIT AN APPLICATION BY FAX OR EMAIL.

Check ✓ one: MC____VISA____AMEX____DISC____ **Full Card #.** _____

Expiration Date: _____ **Card Verification:** _____ **Zip Code:** _____

Cardholder Name (Print) _____

Signature: _____
For your security, PSI requires you to enter the card identification number located on the credit card. The card Identification number is usually located on the back of the card and consists of the last three digits on the signature strip.