



Specialty Commercial/Industrial Flatwork Finisher Client Affidavit (Self-Employed Candidates)

For the Certification Candidate:

Candidates must submit 1 completed form from each of three (3) different Customers or Clients over at least a three (3) year period.

Name: _____ Last four digits of SSN: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Customer/Client/Owner: _____

Project Name: _____ Location: _____

Project Dates: Start Date: _____ (Month/Year) Completed Date: _____ (Month/Year)

Project Type: Commercial Industrial Roadway (on grade) Roadway (elevated)
 Parking Lot (On grade) Parking Structure (Elevated) Other (Please describe) _____

Project Features: Surface Hardener High Tolerance (Superflat) High Performance (Silica Fume)

Employment Responsibilities on Job: Finisher / Hand tools Finisher / Mechanized tools Supervisory

I authorize those whom I have given as references to furnish to the American Concrete Institute (ACI) or its agents information concerning my work experience and other background relevant to the stated requirement of the ACI certification programs. I agree to release and hold harmless any individual, company or institution, including the ACI, and any persons connected therewith from liability imposed by law in furnishing such information. I understand that untruths or misrepresentation contained herein constitute grounds for denial of certification.

I hereby certify that all above information is accurate to the best of my knowledge.

Candidate's Signature: _____ Date: _____

Candidate, please provide this form to the Customer or Client listed above.

For the Customer or Client:

The information above has been provided by the candidate as his or her length of concrete finishing work experience. Please verify the information by completing this form.

- | | |
|--|--------------------|
| | Circle One |
| 1. I am a customer, client, or owner of a project completed by the candidate | YES NO |
| 2. The information above is correct as stated. | YES NO |
- NOTE: If "no" is circled, please provide corrected information in the space below

Comments or Modifications: _____

- | | |
|--|---|
| | Circle One |
| 3. In the time period listed above, I would characterize the candidate's job performance as: | SATISFACTORY UNSATISFACTORY |
- NOTE: If "unsatisfactory" is circled, please provide an explanation in the space below.

Explanation: _____

I have honestly evaluated the information being submitted on this form by the candidate. I have supplied whatever modifications that may have been necessary to make all statements herein conform to the truth, to the best of my knowledge. I submit this form in the belief that it contains no misrepresentations whatsoever.

Signature: _____ Date: _____

Print Name: _____ Title: _____

Company Name: _____ Phone #: _____