ABAA SPF INSTALLER AFFIDAVIT
3000 hours minimum cumulative experience
(1500 hours directly in spray urethane foam)

SECTION 1

IN THE MATTER OF REQUIREMENTS TO BECOME AN AIR BARRIER ASSOCIATION OF AMERICA, INC. LICENSED SPF INSTALLER

I, ________________________, DO SOLEMNLY DECLARE;
that I am the employee of ________________________
and have the following experience:

1. Commercial Air Barrier experience – application on walls
   - ________ hours of experience in spray urethane foams (minimum 1500 hours)
   - ________ hours of experience in self adhered membranes

2. Applicable Related Trade experience***
   - ________ hours in spray-applied waterproofing
   - ________ hours in sheet membrane waterproofing
   - ________ hours in spray-applied air and vapor barrier
   - ________ hours in painting
   - ________ completion of Manufacturer/Distributor training

*** Credit (250 hours) will be given for direct Manufacturer/Distributor training (health & safety and equipment). Proof of completion is required (certificate/letter).

3. Mandatory - Completion of CPI online Health & Safety Course - ID Number: ____________________
   (Course available here: https://www2.virtualtrainingassistant.com/ACC_CPI/LearnerConnection/Security/Logon.aspx)

AND I make this solemn declaration conscientiously believing it is to be true and knowing that it is of the same force and effects as if made under oath.

Signature of applicant ___________________________ Date ________________________

SECTION 2

DECLARED BEFORE ME at the County of ________________________, in the State of ________________________, this _________ day of ____________________, 20__.

X ___________________________

NOTE: Once filled out, SECTION 2 of this form must be signed and stamped by a Notary Public or Commissioner of Oath.