



CONTRACTORS STATE LICENSE BOARD

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STATE OF CALIFORNIA
Arnold Schwarzenegger, Governor

Construction Project Experience Form

This form must be completed **ONLY** if the qualifying individual indicates on the Certification of Work Experience form that he or she obtained experience working on his or her own property as an **owner/builder**, or as otherwise requested by CSLB.

Use a separate form for each project. If you need additional forms, please make a copy of this blank form or visit CSLB's website.

Please type or print neatly and legibly in black or dark blue ink. Incomplete forms are not accepted.

1. QUALIFIER'S (OWNER/BUILDER) FULL LEGAL NAME last first middle			PHONE NUMBER ()
2. PROJECT STREET ADDRESS number/street - NO P.O. boxes		city	state ZIP code
3. START DATE Month/Day/Year	COMPLETION DATE Month/Day/Year	TOTAL PROJECT TIME _____ YEARS and _____ MONTHS	
4. TYPE OF PROJECT (For example, residential room addition)			
5. TRADES PERFORMED (For example, framing, electrical)			
6. PROJECT SIZE (square feet, linear feet, or cubic yards) Building _____ Other _____			
7. YOUR DUTIES AND WORK YOU PERFORMED (For example, prepared plans, obtained permits, installed all sheetrock, installed 4-ton HVAC unit)			
8. YOUR POSITION LEVEL (For example, trainee, apprentice, journeyman, supervisor)			
9. EXPLAIN HOW PAST EXPERIENCE, TRAINING, AND/OR EDUCATION PREPARED YOU FOR THE POSITION AT THE LEVEL STATED IN #8 ABOVE			
10. SCOPE OF WORK (For example, placed 600 sf of mix & sod, installed 2500 sf of concrete tile roof, poured 12 yds of concrete drive, installed 20 linear ft of cabinetry)			
11. NUMBER OF LABORERS AND THE TRADES THEY PERFORMED			
12. NUMBER OF GENERAL CONTRACTORS OR SUBCONTRACTORS AND THE TRADES THEY PERFORMED			
13. COST OF MATERIALS OR TOTAL COST OF PROJECT			

FOR CSLB USE ONLY

