Branch (				Certification No. & D		EN HOICE	
		mation below must b			CTRICALLY DRIV	EN HOIST	
	Miner I D	Number:					
		man or Assistant Min	ne Foreman Numb	mber (If Certified):			
		Electrical Worker Nur					
Name _				_ Daytime Ph	one No.		
Date of	Birth			Age		_	
Address		iox No., or Street Address)		City	State	Zip Code	
					EAR OF EXPERIE ELECTRIC HOIST	NCE OPERATING EQUIPMENT IN A	
			ent mining job and	·	ately the details of each	ch job you have held.	
Emp	oloyment Dat	es		you worked.	ios ana state the rotal	Ton of the finite whole	
From	То	Company					
Address				_			
Title of I	Position						
Supervis	or						
Supervis	.01						
From	То	Company					
Address							
Title of Position							
Supervis	or						
		years of hoisting ex	perience. If addi	tional space is need	led, please attach a		
document fi	351.990 (11) provi led or required to b		Chapter 351 or 352, or a	ny order or decision issued th	tification in any application, re nereunder, shall, upon convicti- e than six (6) months, or both.		
I certify	that the above	e statements are true t	to the best of my k	enowledge and believe	f.		
Date			Applicant	's Signature			

Hoisting Engineer Additional Experience Page 2

Employment Dates			Describe your duties and state the location of the mine where you worked.
From	To	Company	worked.
Address	1		
Title of	Position		
Supervi	sor		
From	То	Company	
Address	3		
Title of	Position		
Supervi	sor		
From	То	Company	
Address	<u> </u>		
Title of	Position		
Supervi	sor		
From	То	Company	
Address	5		
Title of Position			
Supervi	sor		
From	То	Company	
Address			
Title of Position			
Supervisor			
Date			Applicant's Signature

## AFFIDAVIT - HOISTING ENGINEER FOR ELECTRICALLY DRIVEN HOIST

l,		, her	eby certify to the
(Name of Person Certifying to Exp	perience)		-
best of my knowledge and belief,			_ , is a person of
	(Name of	f Applicant)	
sobriety and good moral character and tha	t the applicant has	had	years of practical,
hoisting experience at a coal mine. Further	er, I state that it is	my good faith belief, base	d upon my
knowledge of the applicant's hoisting exp	erience, that the ap	oplicant has acquired a tho	rough
knowledge of safely performing hoisting of	luties at coal mine	s. I have read the data she	eet submitted
herewith and do hereby state that I have k	nowledge of its tru	nth and accuracy, with the	following
exceptions:			
Further, I state that my knowledge	of the facts contain	ined herein was acquired in	n the following
manner: (Please state the manner and time	e period in which	you acquired knowledge o	f the applicant's
work experience, such as employer or sup			
morn emperiores, even us emprey er er sup			
	Signatu	re of person certifying to exp	erience
The foregoing instrument was acknowledge	ged before me by		
this day of		,20	·
NOTARY SEAL			
NUIAKY SEAL	Notary Public		,КҮ
	My Commission	Expires	

I certify under penalty of perjury the above statements are true to the best of my knowledge and belief.