

WORKING AT HEIGHTS

REIMBURSEMENT FORM

"LINEMAN"

Date: _____

Company Name: _____

Company Address: _____

Company Contact _____ Email: _____ Phone: _____

Training Provider: _____

Classifications are as follows*:

- | | | |
|--|--|-----------------------------------|
| Utility Man (1 st Year) | Groundman Driver (1 st Year) | Powerline Technician Apprentice |
| Utility Man (2 nd Year) | Groundman Driver (2 nd Year) | Powerline Technician Apprentice |
| Groundman (1 st Year) | Groundman Driver (3 rd Year) | Powerline Technician Apprentice |
| Foreman Groundman (2 nd Year) | Groundman Equipment (1 st Year) | Powerline Technician Apprentice |
| | Groundman Equipment (2 nd Year) | Journeyman Lineman |
| | Groundman Equipment (3 rd Year) | Sub-Foreman Journeyperson Lineman |
| | | Foreman Journeyperson Lineman |

Name	Training Date	Training Type		Classification* (At time of training)	ECA USE ONLY
		New	Recertify		

NOTE:
Ottawa ECA will require a copy of the training certificate for each individual.

SUB-TOTAL WAGES:	
TRAINING COST:	
HST:	
TOTAL:	

YOUR PREFERRED REIMBURSEMENT METHOD:

- CHEQUE
- eTRANSFER
(eTransfer Information): _____