



CTQP Quality Control Manager Prerequisite Affidavit

Instructions:

Complete the information below and return the form (and any required attachments) to admin@ctqpflorida.com

Written Exam	Information:	
 Date	Serial Number	Provider
I certify that I ha	ave a current CTQP qualification one)	of one of the following:
□ Asphalt□ Earthwo□ Concret	Paving Level 2 Plant Level 2 ork Construction Inspector Level 2 e Field Level 2 (Full ACI-CTCI Ce e Laboratory Technician Level 2	
I have attached	a copy of my current CTQP certif	ïcate noted above.
Signature		
Name		
Drivers License	Number	Date
Email		