Use these Instructions if you have your ASE A-6, A-8 and L-1 Certifications

- Class of License Box:
  - Check "Smog Check Inspector (EO) box
  - Check Smog Check Repair Technician
- ➤ Box 7 is same as your mailing address unless you have a separate PO Box
- ➤ Box "11b" complete the box highlighted in orange
- ➤ Box "12a" complete the box highlighted in orange
- ➤ Box "13" Sign and date
- > Do not complete the Experience Verification Form



#### BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR

### BUREAU OF AUTOMOTIVE REPAIR | LICENSING PROGRAM

PO Box 989001, West Sacramento, CA 95798-9001 P (855) 735-0462 F (855) 641-9982 | www.bar.ca.gov



## SMOG CHECK INSPECTOR AND/OR SMOG CHECK REPAIR TECHNICIAN LICENSE APPLICATION

FEE: \$20.00

# DO NOT USE THIS APPLICATION TO RENEW THIS LICENSE

FOR DEPARTMENT USE ONLY
License #:
Receipt#:
ATS#:
Date Processed:

Please type or print legibly in ink. If	fnot applicable, indicate N/	4.				
CLASS OF LICENSE (Se	elect one or both that apply)					
✓ SMOG CHECK INSF	PECTOR (EO)	SMOG CHECK REPAIR	R TECHNICIAN (EI)			
APPLICANT INFORMA	TION					
1. APPLICANT NAME	Last	First	Middle	2. DATE	OF BIRTH	
3. SOCIAL SECURITY/IND	3. SOCIAL SECURITY/INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER					
4. GOVERNMENT PHOTO	) ID ISSUING AUTHOR	RITY, DOCUMENT TITL	E, AND NUMBER (EXAMPLE	:: CALIFORNIA DRIVER LICE	NSE A123456)	
5. PRIMARY TELEPHONE	NUMBER		6. ALTERNATE TELEP	HONE NUMBER		
7. ADDRESS OF RECORD  Note: Address will be posted on BAR's website.	Number and Street or PO		City	State	Zip Code	
8. MAILING ADDRESS	Number and Street	Suite or Unit#	City	State	Zip Code	
9. EMAIL ADDRESS						
10. BACKGROUND						
a. Have you ever serv	ved in the United State	es military?			YES	□ №
If YES, you must pro	If YES, you must provide required documentation. Refer to instructions page.					
b. Are you married to or in a domestic partnership or other legal union with an active duty member of the U.S. military assigned to a duty station in California under official active duty military orders?			☐ YES	□ ио		
If YES, you must pro	If YES, you must provide required documentation. Refer to instructions page.					
C. Are you a refugee, asylee, or holder of a special immigrant visa?			☐ YES	□ NO		
If YES, you must provide required documentation. Refer to instructions page.						
	nt of Consumer Affairs type of license(s) and lic		comotive Repair (BAR) eve	r issued you a license	? YES	□ NO
e. Have you ever had DCA or BAR?	a license, certificate,	or registration denied, s	suspended, revoked, or pla	aced on probation by	YES	□ NO
If YES, provide a sta	atement of explanation.					

f. Has DCA or BAR ever issued you a citation?	YES	□ №			
If YES, provide a statement of explanation.					
g. Have you ever been convicted of any offense or entered a plea of nolo contendere in the United States or a foreign country?		□NO			
This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. Note: Convictions that were adjudicated in the juvenile court or convictions two years or older under California Health and Safety Code sections 11357(b), (c), (d), (e), or section 11360(b) should not be reported. Convictions that were later dismissed by the court or set aside pursuant to section 1203.4, 1203.4(a), 1203.41, or 1203.42 of the California Penal Code or equivalent non-California law MUST be disclosed.					
If YES, provide a statement of explanation, including the crime for which there was a conviction, the approximate date at location of the crime, and the sentence served, if any.	ıd				
h. Exclusive of juvenile court adjudications and criminal charges dismissed under section 1000.3 of the California Penal Code or equivalent non-California laws, or convictions two years or older under California Health and Safety Code sections 11357(b), (c), (d), (e), or section 11360(b), have you had a conviction that was later dismissed or set aside by the court?	YES	□ NO			
If YES, provide a statement of explanation.					
i. Is any criminal action pending against you, or are you currently awaiting judgment and sentencing following entry of a plea or jury verdict?	☐ YES	□ NO			
If YES, provide a statement of explanation.					
11. INSPECTOR (EO) APPLICANTS MUST COMPLETE THIS SECTION					
INSPECTOR LICENSE: May inspect and certify the emissions control systems on vehicles subject to the Smog Check Program at a licensed Smog Check Test-Only or Test-and-Repair station.					
<b>REQUIREMENTS FOR LICENSURE</b> : Examination Required. You must meet <b>one</b> of the following <b>three</b> prerequisites in order to qualify to take the examination:					
a. I have successfully completed BAR specified ENGINE and EMISSION CONTROL TRAINING, AND have successfully completed the BAR Smog Check Training in the past 2 years.					
b. CERTIFICATION: I am certified by the National Institute for Automotive Service Excellence (ASE) in all three of the fol successfully completed BAR specified Smog Check Training in the past 2 years.	owing areas, and	d have			
Electrical/Electronic Systems (A6) Expiration date:					
Engine Performance (A8) Expiration date:					
Advanced Engine Performance Specialist (L1) Expiration date:					
c. EDUCATION/EXPERIENCE: You must meet one of the requirements below:					
I possess an Associate of Arts, Associate of Science, or higher degree in Automotive Technology from a state accredited or recognized college, public school, or trade school, AND have one year automotive repair experience in the engine performance area, AND have successfully completed the BAR Smog Check Training in the last 2 years; OR					
I possess a certificate in automotive technology from a state accredited or recognized college, public school, or trade school with a minimum of 720 hours of course work that includes at least 280 hours of course work in the engine performance area, AND have one year of automotive repair experience in the engine performance area, AND have successfully completed the BAR Smog Check Training in the last 2 years; OR					
year of automotive repair experience in the engine performance area, AND have successfully completed the BA					
year of automotive repair experience in the engine performance area, AND have successfully completed the BA	R Smog Check T	raining eted			
year of automotive repair experience in the engine performance area, AND have successfully completed the BA in the last 2 years; OR  I have a minimum of two years of automotive repair experience in the engine performance area, AND have suc BAR specified Diagnostic and Repair Training in the past five years, AND have successfully completed the BAR	R Smog Check T	raining eted			

Inspector/Tech App 1A (03/2014)

12. REPAIR TECHNICIAN (EI) APPLICANTS MUST COMPLETE THIS SECTION					
REPAIR TECHNICIAN LICENSE: May diagnose, adjust, and repair the emissions control systems on vehicles subject to the Smog Check Program at a licensed Smog Check Test-and-Repair or Repair-Only station.					
<b>REQUIREMENTS FOR LICENSURE</b> : Examination Required. You must meet <u>either</u> the Certification or Education/Experience prerequisites in order to qualify to take the examination:					
a. CERTIFICATION: I am certified by the National Institute for Automotive Service Excellence (ASE) in all three of the following areas:					
	Electrical/Electronic Systems	(A6)	Expiration date:		
	Engine Performance	(A8)	Expiration date:		
	Advanced Engine Performance Specialist	(L1)	Expiration date:		
b. EDUCATION/EXPERIENCE: You must meet one of the requirements below:    Dossess an Associate of Arts, Associate of Science, or higher degree in Automotive Technology from a state accredited or recognized college, public school, or trade school, AND have one year automotive repair experience in the engine performance area; OR    Dossess a certificate in automotive technology from a state accredited or recognized college, public school, or trade school with a minimum of 720 hours of course work that includes at least 280 hours of course work in the engine performance area, AND have one year of automotive repair experience in the engine performance area, OR    I have a minimum of two years of automotive repair experience in the engine performance area, AND have successfully completed BAR specified Diagnostic and Repair Training in the past five years; OR    I have comparable military education/experience.  APPLICANTS QUALIFYING VIA EDUCATION/EXPERIENCE MUST SUBMIT THE EXPERIENCE VERIFICATION FORM INCLUDED IN THIS APPLICATION PACKAGE, AND, AS APPLICABLE, PROVIDE A COPY OF THEIR DEGREE OR CERTIFICATE.					
13. CERTIFICATION					
I certify under penalty of perjury under the laws of the state of California that all the statements I have made in this application and all attached supporting documents pertaining to this application are true and correct.					
SIGNATURE OF APPLICANTDATE					

**NOTE**: Once submitted, your application for Smog Check inspector and/or Smog Check repair technician license and supporting documentation become the property of BAR and will be kept as a matter of record. MAKE A COPY OF THIS COMPLETED AND SIGNED APPLICATION FOR YOUR RECORDS.

## **EXPERIENCE VERIFICATION**

If you are applying for an initial Smog Check inspector and/or Smog Check repair technician license using education and/or experience to qualify, you **must** complete this section of the application. Applicants qualifying for licensure with ASE certification (A6, A8, and L1) are not required to complete this section of the application.

- Comparable military education and/or experience verified by official military records may be accepted in liea of other training-related requirements listed in this application. Visit www.bar.ca.gov for required documentation
- Employer certification is required, unless the applicant is self-employed.
- If required experience was gained from multiple employers, include information for each employer in the designated areas below.

APPLICANT INFORMATION				
APPLICANT NAME Last First	Middle			
CHECK EACH BOX THAT DESCRIBES YOUR DIAGNOSIS AND REPAIR EXPERIENCE    ENGINE REPAIR   FUEL SYSTEMS				
☐ DRIVEABILITY DIAGNOSIS AND REPAIR	ELECTRICAL AND PLECTRONIC SYSTEMS			
☐ EMISSION SYSTEMS				
CURRENT OR MOST RECENT EMPLOYER CERTIFICATION (E	mployer/Supervisor/Manager/Military Supervisor)			
☐ Self Employed				
I certify under penalty of perjury under the laws of the state of California that indicated above and that statements made on this form by the applicant leg				
NAME OF EMPLOYER/SUPERVISOR/ MANAGER/MILITARY SUPERVISOR				
SIGNATURE OF EMPLOYER/SUPERVISOR/ MANAGER/MILITARY SUPERVISOR_	DATE			
EMPLOYMENT INFORMATION				
NAME OF BUSINESS (AS SHOWN ON AUTOMOTIVE REPAIR DEVICER REGISTRATION)	AUTOMOTIVE REPAIR DEALER REGISTRATION NUMBER			
BUSINESS ADDRESS Number and Street or PO Box Suite or Unit #	City State Zip Code			
BUSINESS AREA CODE AND TELEPHONE NUMBER	LENGTH OF EMPLOYMENT (YEARS/MONTHS)			
NAME OF BUSINESS (AS SHOWN OF AUTOMOTIVE REPAIR DEALER REGISTRATION)	AUTOMOTIVE REPAIR DEALER REGISTRATION NUMBER			
BUSINESS ADDRESS Number and Street or PO Box Suite or Unit #	City State Zip Code			
BUSINESS AREA CODE AND TELEPHONE NUMBER	LENGTH OF EMPLOYMENT (YEARS/MONTHS)			
APPLICANT CERTIFICATION				
I certify ander penalty of perjury under the laws of the state of California that I have hands-on diagnostic and repair experience in the areas indicated above and that all statements I have made on this form are true and correct.				
IGNATURE OF APPLICANT	DATE			

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