



PRIME MANAGEMENT LLC

Handyman - Employment Application

Please email your application to info@primemanagementct.com with the subject "Handyman Application" or drop it off at our office at **560 Orchard St, New Haven, CT 06511**. Feel free to attach copies of additional information, such as certificates, licenses, resume, and business cards. If you have any questions, contact the office at **203-562-7368**.

PERSONAL INFORMATION

Name: _____

Home address: _____

Primary phone #: _____ Secondary phone #: _____

Are you employed now? Yes No May we contact your employer? Yes No

Employer email: _____

How did you hear about us? _____

Date of application: _____ Hourly Rate desired _____

Which best describes you? (check all that apply)

<input type="checkbox"/> Carpenter	<input type="checkbox"/> Helper	<input type="checkbox"/> Plumber
<input type="checkbox"/> Electrician	<input type="checkbox"/> Skilled Helper	<input type="checkbox"/> Jack of all trades
<input type="checkbox"/> HVAC	<input type="checkbox"/> Roofer	<input type="checkbox"/> Sider
<input type="checkbox"/> Major Construction	<input type="checkbox"/> Painter	<input type="checkbox"/> Sheetrock/Drywall installer
<input type="checkbox"/> Mason	<input type="checkbox"/> Master Carpenter	

LIST CERTIFICATIONS, LICENSES, AND FORMAL TRAINING

PREVIOUS EMPLOYMENT

Company: _____ Phone: _____

Job Title: _____ Supervisor: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No

Other Experience:

ABILITIES

- | | | |
|--|------------------------------|-----------------------------|
| I am able to lift 60lbs | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am able to lift 80lbs | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am able to work on a 6' A frame ladder | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am comfortable working on a 12' A frame ladder | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am comfortable working on a 32' extension ladder | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am comfortable working on a 40' extension ladder | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am comfortable working on a scaffolding 2 stories high | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am comfortable working on a scaffolding 3 stories high | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am comfortable working on a 1 story roof | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am comfortable working on a 2 story roof | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am comfortable working on a 3 story roof | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am able to carry full sheet of 5/8 sheetrock | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am able to carry 3/4 plywood | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I can measure to 1/16" | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I can cut a straight line | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

SKILLS

Please rate your experience from 0-5 with 5 being very skilled and 0 having no knowledge

	Rate 0-5	Additional Comments
Installation of cabinets		
Installation of prehung doors		
Repair of doors/hinges		
Installation of slabs in to existing frame		
Installation of vinyl replacement windows		
Installation of trim and baseboard		
Installation of hardwood floors		
Refinishing of hardwood floors		
Installation of laminate floors		
Installation of floor tile		
Installation of wall tile/tub surround		
Installation of sheet vinyl flooring		

	Rate 0-5	Additional Comments
Run new drain lines		
Repaired cast iron drains		
Worked with furnaces		
Work with Pex		
Solder copper		
Work with black gas piping		
Work with flexible gas piping (track pipe)		
Install a water heater (gas or electric)		
Install a boiler (gas or oil)		
Work with shark bites		
Repair a galvanized water line		
Difference between gate valve and ball valve		
Pressure test gas piping		
Knowledge of HUD regulations		
Knowledge of FHA regulations		
Knowledge of Local and State Building Codes		
Knowledge of local and state Plumbing Codes		
Knowledge of local and state Electrical Codes		

TOOLS THAT YOU OWN

- Tool Belt Yes No
- Tape Measure 25' Yes No
- Hammer Yes No
- Crow bar/pry bar/ cats claw Yes No
- Screw drivers Yes No
- Cordless drill Yes No
- Cordless saw Yes No
- Cordless sawzall Yes No
- Corded sawzall Yes No
- Jig saw Yes No
- Router Yes No
- Chisels Yes No
- Framing square Yes No
- T - square Yes No
- Razor knife Yes No
- Mitre saw Yes No
- Plainer Yes No
- Putty knives/taping knives Yes No
- Chalk line Yes No
- Channel lock plyers Yes No
- Adjustable wrench Yes No

- | | | |
|--------------------------|------------------------------|-----------------------------|
| Torque wrench | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Ratchet Set | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Basin wrench | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Tubing cutter | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Propane torch | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Wire strippers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Linemans plyers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Sheet metal sheers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Tin Snips right and left | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Ladder | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Framing nailer | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Compressor | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Aluminum break | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Ladder Racks | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Tool Box | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

REFERENCES

Name: _____
Phone: _____ **Relationship:** _____

Name _____
Phone: _____ **Relationship:** _____

Name _____
Phone: _____ **Relationship:** _____

OTHER INFORMATION

Vehicle Type: _____

Additional Information:

