

LIC2: License Application

Application must be typewritten. License Number Section is used for: Changes, Renewals, and Reissues

1	APPLICATION TYPE							
	☐ New ☐ Renewal	Reissue (Lost/Stolen)	☐ Ch	nange (i.e. Address/Busi	ness/Deactivation)	Reinstatement		
2	LICENSE NUMBER							
3	LICENSE TYPE							
	☐ Elevator ○ Director	O Co-Director	Inspector	O Technician O	Limited Technician (Helper		
	☐ Engineer	OPortable		☐ Sign Hange	er O Master	O Special		
	Hoisting Machine Operator	O A O B O	С	☐ Site Safety		Coordinator		
	Master Plumber	Master Plumber			☐ Concrete Safety Manager			
	☐ Master Fire Suppression Piping Contractor ☐ A ☐ B ☐ C ☐ Construction Superintendent							
	Oil Burning Equipment Install	ler A	В	Rigger	Master S _I	pecial O Tower		
4	4 APPLICANT INFORMATION (required for all applications)							
	First Name:		Middle II	nitial: Last Name:				
	Home Address:			Ho	ome Telephone:			
	City:	State:		Zip: Mo	bile Telephone:			
	Date of Birth (m/d/yy)	*Sc	cial Security	No.:	Email:			
5A	PRIMARY BUSINESS INFOR	MATION (required for all	applications)	6 LICENSE USE	(choose one)		
	Bus. Name:	Bus. Email			Individual/So	ble-Proprietor		
	Bus. Address:	Bus. Phone			On Behalf of	a Corporation		
	City:	State Zip				a Partnership		
5B	SECONDARY BUSINESS INF	ORMATION				a City Agency		
	Bus. Name: Bus. Email							
	Bus. Address:	Bus. Address: Bus. Phone		7 CITY EMPLOYEE?				
	City:	State Zip			Yes	No		
8	8 PARTNER OR OFFICER INFORMATION (must list all partners or officers)							
	Name:			Name:				
	Address:	Phone:		Address:		Phone:		
	City: State: Zip:			City: State: Zip:				
	Lic. No.: % Cont	rol:		Lic. No.: % Control:				
	` '	Title(s):		Title(s):				
	Name: Address:	Phone:		Name: Address:		Phone:		
	City: State: Zip:		City: State: Zip:					
	Lic. No.: % Control:			Lic. No.: % Control:				
	Title(s):							
9	9 LICENSING HISTORY							
	List all licenses, certifications, or registrations issued to you, by any City or State.							
	NAME	TYPE	LIC./CERT	./REGISTRATION NO.	CURRENT STATUS	EXPIRATION DATE		
	-	Yes No Do you currently have a valid driver's license? State where issued: Driver's License No.:						
	Yes No Have any licenses or privileges granted to you or your associated business(es) by the Department of Buildings or any other government entity ever been rescinded, revoked, surrendered, suspended, otherwise disciplined, or have you or your related business(es) ever been disqualified from performing inspections? If Yes please indicate the type of license/certification/							
	registration with the reason for the suspension, restriction, surrender, revocation, or disciplinary action in Section 10 . Yes No Have any license application(s) even been denied to you by the Department of Buildings or any other government entity?							



10	COMMENTS				
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11	CONVICTIONS & FINES				
If you answer Yes to either of these questions, you must complete and attach form LIC34 .					
	☐ Yes ☐ No Have you ever been convicted	or pled guilty to an offense anywhere (an offense is o	n offense anywhere (an offense is defined as a violation, misdemeanor or felony)?		
	Yes No Do you owe any penalties to the	e City of New York?			
		s you have been associated with under your Departm that were incurred during your association with that			
12	STATEMENTS & SIGNATURES				
As a condition of being granted a license, I attest that I comply with all New York City Administrative Code and Department and directives governing how licensees conduct their specific trade. I understand it is unlawful to make a false statement to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for projob or in exchange for special consideration. Such actions are punishable by imprisonment, fine and/or loss of license accident that involves my actions undertaken in connection with my license, I understand that the Administrative Code requivith any investigation and that failure to do so may result in immediate suspension, revocation or other disciplinary action.					
	Name (print)	Notarization State of New York, County of:	Notary Seal		
	Signature	Sworn to or affirmed under penalty of perjury			
		day of 20			
	Date	Notary Signature			
	INTERNAL USE ONLY				
	Fee Paid: Transaction	Fee Paid: Transaction Type:			
	Expiration Date: Clerk's Sign	Date:			