



Elevator Worker Director's Attestation Form

Form must be typewritten

Date _____

Elevator Director License No. _____

PURPOSE: The **Elevator Director** must complete this form to confirm the status of an individual as an Elevator Technician, Restricted Technician or Helper.

ELEVATOR DIRECTOR INFORMATION

Last Name _____ First Name _____ Middle Initial _____

Telephone No. _____ Email Address _____

Business Name _____ Business Telephone No. _____

Business Address _____

City _____ State. _____ Zip Code _____

Business Email _____ Mobile Telephone No. _____

APPLICANT INFORMATION

Elevator Technician Restricted Technician Helper Date of Birth _____

Last Name _____ First Name _____ Middle Initial _____

Telephone No. _____ Email Address _____

Home/Street Address _____

City _____ State. _____ Zip Code _____

AFFIRMATION OF ELEVATOR WORKER QUALIFICATIONS

An individual designated as an Elevator Technician, a Restricted Technician, or a Helper shall:

- Be employed, on the payroll, and covered by the Worker's Compensation Insurance of the Elevator Director's registered elevator agency;
- Be under the direct and continuous supervision of the licensed Elevator Director of record;
- Be at least 18 years of age;
- Be able to read and write in English;
- Have the ability, fitness and knowledge to assist in the performance of elevator work in a safe and compliant manner in accordance with all relevant rules and regulation.

I hereby attest to the fact that all the above statements are true.

DIRECTOR'S STATEMENTS & SIGNATURES *(required for all applicants)*

I hereby state that all information submitted is correct and complete to the best of my knowledge. Falsification of any statement is a misdemeanor under §§ 28-211.1, 28-201.2.1.2, and 28-203.1.1 of the Administrative Code and is punishable by a fine, imprisonment, or both. I understand that it is a crime to offer or give to a City employee, or for a City employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. A conviction of offering of a bribe or gratuity is punishable by imprisonment, fine or both.

Elevator Director's Name <i>(print)</i>	Notarization State of New York, County of:	Notary Seal
Signature	Sworn to or affirmed under penalty of perjury	
Date	day of _____ 20____ Notary Signature	