



LIC2: License Application

Application must be typewritten.

License Number Section is used for: Changes, Renewals, and Reissues.

Buildings

1 Application Type | 2 License Number

New Renewal Reissue (Lost/Stolen) Change (ie: Address/Business/Deactivations)

3 License Type

Elevator Inspector Stationary Portable Rigger Master Special Tower Concrete Safety Manager
Engineer Sign Hanger Master Special Construction Superintendent
Hoisting Machine Operator Class: Site Safety Manager Coordinator
Master Plumber Welder
Oil Burning Equipment Installer Class: Master Fire Suppression Piping Contractor Class:

4 Applicant Information Required for all applications.

First Name: Middle Initial: Last Name:
Home Address: Home Telephone:
City: State: Zip: Mobile Telephone:
Date of Birth (m/d/yy) *Social Security No.: E-Mail:

5a Primary Business Information | 6 License Use

Business Name Bus. E-mail:
Office Address: Bus. Phone:
City: State: Zip:

Choose One:
Individual/Sole-Proprietor
On Behalf of a Corporation
On Behalf of a Partnership
On Behalf of a City Agency

5b Secondary Business Information (if applicable)

Business Name Bus. E-mail:
Office Address: Bus. Phone:
City: State: Zip:

7 City Employee?
Yes No

8 Partner or Officer Information (must list all partners or officers)

Table with 2 columns for partner/officer details: Name, Address, City, State, Zip, Phone, Lic No, % Control, Title(s).

9 Convictions and 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 defined as a violation, misdemeanor or felony)?
Yes No Do you owe any penalties or fines to the City of New York?
Yes No Does any company or business you have been associated with under your Department-issued license owe any fines, penalties or fees to the City of New York that were incurred during your association with that company or business?

10 Statements and Signatures

As a condition of being granted a license, I attest that I comply with all New York City Administrative Code and Department rules, regulations, and directives governing how licensees conduct their specific trade. I understand it is unlawful to make a false statement to the Department; or to 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. Such actions are punishable by imprisonment, fine and/or loss of license. In the event of an accident that involves my actions undertaken in connection with my license, I understand that the Administrative Code requires that I cooperate with any investigation and that failure to do so may result in immediate suspension, revocation or other disciplinary action.

Notarization form with fields for Name (print), Signature, Date, Notarization State of New York, County of, Sworn to or affirmed under penalty of perjury, day of, 20, Notary Signature, and Notary Seal.

Internal Use Only

Fee Paid: Transaction Type:
Expiration Date: Clerk's Signature: Date:

*Social Security Number is required for new applicants only