



New York City Gym and Fitness Facility Inspection Request and Attestation Form

Gyms and fitness centers that are reopening must be inspected by the New York City Department of Health and Mental Hygiene (NYC Health Department). Each facility location must:

- Complete and submit this form to the NYC Health Department. **By submitting this form, you are attesting that you have met all [New York State reopening requirements](#).**
- Undergo and pass an inspection.

After you submit this form, the NYC Health Department will contact you to set up a virtual inspection via video conference call. A facility manager with knowledge of the operational changes made to meet the state requirements must be available to conduct the video walk-through with a NYC Health Department inspector.

Questions that you may have are answered [here](#).

Business Information

1. Business Name: _____
2. Business Address (facility/gym location):

Street Address 1	Street Address 2	Borough	Zip
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3. Type of gym or fitness facility (check all that apply):
 - Standalone fitness facility/gym
 - Fitness facility/gym within a hotel
 - Fitness facility/gym within a residential building
 - Fitness facility/gym within an office building/business
 - Fitness facility/gym within a higher education institution
 - Other (explain): _____
4. Does your gym have more than one location?
 - Yes
 - No

Please submit a New York City Gym and Fitness Facility Inspection Request Form for each location.

5. Hours of Operation (once facility reopens):

Monday: _____ Tuesday: _____ Wednesday: _____ Thursday: _____

Friday: _____ Saturday: _____ Sunday: _____

6. Owner/Manager First Name: _____ Owner/Manager Last Name: _____
7. Site Contact First Name: _____ Site Contact Last Name: _____
8. Site Contact Job Title: _____
9. Site Contact phone number: This will be the primary contact number for the inspection:
_____ Extension: _____ Confirm phone number: _____
10. Site Contact email address: _____ Confirm Email: _____



Business Reopening

11. Date Facility Will Reopen: _____

New York State Reopening Requirement Checklist

I understand that if the below items are not ready at time of inspection, contrary to this affirmation, the operator will need to resubmit the intake request form when all items are ready for inspection. The inspection will be rescheduled at a time convenient to the NYC Health Department, and until the inspection is successfully completed, the gym must remain closed.

By checking all boxes below, you are affirming that your facility has implemented all New York State requirements or affirming that the requirement is not applicable to your facility.

Helpful resources include:

- [NYS Department of Health \(DOH\) Interim COVID-19 Guidance for Gyms & Fitness Centers](#)
 - [Reopening Gyms and Fitness Centers Summary of Guidance](#)
 - [Centers for Disease Control and Prevention \(CDC\) Coronavirus Guidance](#)
 - [NYS DOH Coronavirus Guidance](#)
 - [Department of Environmental Conservation \(DEC\) Products](#)
 - [CDC Guidance for Cleaning & Laundry](#)
 - [NYS DOH Sports and Recreation Guidance](#)
- My gym has completed the required NYS safety plan and it is on site and conspicuously posted.
- My gym has reviewed and affirmed NYS DOH reopening gyms and fitness center [interim guidance](#).
- My gym has a plan to limit capacity within the gym to no more than 33% of the maximum occupancy, inclusive of employees and patrons.
- The maximum allowable occupancy at my gym before COVID-19 is _____.
- My gym has a site safety monitor whose responsibilities include compliance with all aspects of the safety plan.
- My gym has posted all required signage inside and outside the gym to remind employees and patrons to adhere to proper hygiene, social distancing rules, appropriate use of personal protective equipment, and cleaning and disinfection protocols.
- My gym has posted markings 6 feet apart where people would be forming lines or gathering.
- My gym requires employees and patrons to wear face coverings at all times, provided they are over age 2 and medically able to tolerate face coverings. Acceptable face coverings include, but are not limited to, cloth-based face coverings and disposable masks appropriate for exercise that cover both the mouth and nose. Bandanas, buffs, and gaiters are not acceptable face coverings for use in gyms and fitness centers.
- My employees are provided with an acceptable face covering at no cost to the employee and my gym has an adequate supply of coverings in case of need for replacement.
- My gym requires employees and patrons, and, where practicable, contractors and vendors, to complete a health screening prior to entering the facility. Screening criteria must follow [NYS DOH guidance](#).

- My gym requires employees and patrons to sign in with contact information (full name, address, phone number) and will retain records for a minimum of 28 days. Records can be made available to state/city health department upon request.
- My gym has cleaning and disinfection supplies made available to customers and requires that shared equipment be cleaned after every use by patrons or employees.
- My gym has hand hygiene stations throughout facility including handwashing sinks with soap, running warm water, and disposable paper towels, as well as an alcohol-based hand sanitizer containing 60% or more alcohol for areas where handwashing is not feasible, and in common areas (e.g., entrances, exits, next to workout stations).
- My staff are available to clean and disinfect equipment in between uses, and rental equipment (e.g. cleaned shoes, yoga mats) must be cleaned and disinfected between customer use.
- My gym follows the hygiene, cleaning, and disinfection requirements from the [Centers for Disease Control and Prevention](#) (CDC) and NYS [Department of Health](#) (DOH), using Department of Environmental Conservation (DEC) [products](#) identified by the Environmental Protection Agency (EPA) as effective against COVID-19, and maintain logs on site that document date, time, and scope of cleaning and disinfection.
- My staff are required to sanitize or wash their hands before and after contact of shared objects or frequently touched surfaces (excluding workout equipment) or wear trade-appropriate or medical gloves.
- My gym's locker rooms and restrooms are cleaned and disinfected at least every 2 hours or my gym does not have lockers or restrooms.
- My gym's communal showers are closed, but individual showers/stalls can remain open so long as they are cleaned and disinfected in between each use or my gym does not have showers.
- My gym's water fountains, whirlpools, saunas, and steam rooms are closed (water bottle refill stations are permitted) or my gym does not have these features.
- My gym follows [CDC guidance](#) for any towel/laundry service or my gym does not have towel/laundry service.
- My gym has modified the use, reorganized, or restricted the number of workout stations (including cardio equipment and mats) so that individuals are at least 6 feet apart or my gym does not have workout stations.
- My gym prohibits higher risk activities (e.g., basketball, volleyball, martial arts) listed in the [New York State DOH Sports and Recreation Guidance](#) or my gym does not offer high risk activities.
- My gym has a designated area for pick-ups and deliveries.

Facility meets one of the following air handling system requirements:

- Facility has central air system that meets minimum MERV-13 or equivalent standards, and system has been certified and documented by HVAC technician, professional, or company, or by a NYS licensed professional building engineer (collectively "professional") of meeting this requirement. Documentation is on site and will be available for inspection.
 - Name of certifying person or company: _____
 - Certification number: _____
 - What type of certification or license?
 - Certified HVAC technician, professional, or company
 - ASHRAE-certified professional



- Certified retro-commissioning professional
- New York licensed professional building engineer

OR

- Facility has central air system that has been documented by HVAC technician, professional, or company, or by a NYS licensed professional building engineer that currently installed system that it is unable to support or provide MERV-13 or equivalent standards. Documentation is on site and will be available for inspection. Facility is adopting additional ventilation and air filtration mitigation protocols per CDC and ASHRAE recommendations outlined in the Interim COVID-19 Guidance for Gyms & Fitness Centers.
 - Name of certifying person or company: _____
 - Certification number: _____
 - What type of certification or license?
 - Certified HVAC technician, professional, or company
 - ASHRAE-certified professional
 - Certified retro-commissioning professional
 - New York licensed professional building engineer

OR

- Facility does not have central air, or does not operate or control the systems. Facility is adopting additional ventilation and air filtration mitigation protocols per CDC and ASHRAE recommendations outlined in the Interim COVID-19 Guidance for Gyms & Fitness Centers.

By submitting this form, I agree that my gym/fitness center has met all the New York State reopening requirements, and that all the statements made in this form are true and complete. Making a false statement is an offense punishable by fines, imprisonment or both. (NYC Administrative Code § 10-154.)

[SUBMIT]