

**--L-19 SAMPLE RECOMMENDATION LETTER--**

**COMPANY NAME  
BUSINESS ADDRESS**

Date: \_\_\_\_\_

Fire Department  
Bureau of Fire Prevention  
9 Metro Tech Center  
Brooklyn, NY 11201-3857

To whom it may concern:

I am pleased to recommend (Applicant's name) to apply for the L-19 Certificate of Fitness for **SUPERVISION OF SANITARY LANDFILL METHANE RECOVERY FACILITIES.**

The applicant has been worked under the supervision of (name of a L-19 C of F holder) with the C of F number: (L-19 COF holder's COF number) in the sanitary landfill methane recover at (premises address) for (amount of time employed, must be more than 6 months)

After the applicant receives the L-19 C of F, the applicant will be working at (Address of building where certificate is to be used).

Applicant is of GOOD CHARACTER and is PHYSICALLY ABLE to perform the functions required by the holder of the Certificate of Fitness.

\_\_\_\_\_  
(Printed name of Employer)

\_\_\_\_\_  
(Employer's title)

\_\_\_\_\_  
(Signature of Employer)

**NOTE: The recommendation letter should be on employer's letterhead. If not on employer's letterhead, signature must be notarized.**