



**Section A – COMPANY (to be completed by owner/principal only)**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Name of Owner or Principals Completing Application: \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Agent for Receipt of Process located in NYC for Judicial OR Administrative Proceedings or Action \_\_\_\_\_ @ \_\_\_\_\_

(P.O. Box not acceptable)

Name	Address	Town	Zipcode
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**Section B – OWNER/PRINCIPAL (to be completed by owner/principal only)**

A. Are you or have you ever been employed by the FDNY or any other City agency in past three years?

YES  NO

If yes, state the name and dates of employment \_\_\_\_\_

If yes, have you sought or received approval from the NYC Conflicts of Interest Board? (attach copy of the ruling)

YES  NO

**Section C- OWNER/PRINCIPAL PROFESSIONAL EXPERIENCE (to be completed by Owner/Principal only)**

Please list work experience for the past 5 years.

COMPANY \_\_\_\_\_ DATES \_\_\_\_\_ to \_\_\_\_\_

DUTIES \_\_\_\_\_

COMPANY \_\_\_\_\_ DATES \_\_\_\_\_ to \_\_\_\_\_

DUTIES \_\_\_\_\_

COMPANY \_\_\_\_\_ DATES \_\_\_\_\_ to \_\_\_\_\_

DUTIES \_\_\_\_\_

**Section D – RESUME (to be completed by owner/principal only)**

Did you attach a typed copy of your resume? \_\_\_\_ Yes

Yes must be answered to proceed

**Section E – RELATIONSHIPS (to be completed by owner/principal only)**

Are any members of your immediate family or household employed by the FDNY?  YES  NO

If yes provide relationship, names, titles, rank, Bureau –

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**Section F- ADDITIONAL INFORMATION (to be completed by owner/principal only)**

**LIST ALL VIOLATIONS, JUDGEMENTS, CONVICTIONS AND PENALTIES ISSUED AGAINST THE COMPANY, PRINCIPALS OR OFFICERS IN THE PAST 5 YEARS**

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**LIST ALL FDNY PERMITS ISSUED TO THE COMPANY, PRINCIPAL OR OFFICERS**

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**Section G - CONVICTION RECORD (to be completed by owner/principal only)**

1. You must list all prior convictions and pending charges. You should NOT include Parking violations. A guilty plea is a conviction even if you were never imprisoned and only fined. You must also disclose if you were conditionally/ unconditionally discharged or received a Certificate of Relief from Disabilities. You do not have to disclose any material sealed or set aside under Federal and NY State law, or material pertaining to a youthful offender category. You may not be considered a youthful offender based on your age at the time of the offense. If you are unsure, list the offense.

YES  NO

2. Are there any criminal charges pending against you?

YES  NO

**LIST ALL CONVICTIONS AND/OR PENDING CHARGES BELOW:**

**DATE OF CONVICTION    TYPE OF OFFENSE    NAME & LOCATION OF COURT    SENTENCE/FINE**

DATE OF CONVICTION	TYPE OF OFFENSE	NAME & LOCATION OF COURT	SENTENCE/FINE

Add additional sheets, if necessary

COMMENTS –

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**Section H– Oath or Affirmance and Acknowledgement (to be completed by owner/principal only)**

I hereby affirm that all statements are true and could be persecuted under penalty of perjury.

I also affirm that this certificate, if issued, is subject to the requirements of all applicable provisions including Fire Code 116-01.

I also affirm that I will notify the FDNY in writing within 24 hours of changes regarding this form.

I also consent to a background check if requested by the FDNY.

I understand that the FDNY reserves the right to evaluate and distribute my performance as a Filing Processor (Expeditor.)

\_\_\_\_\_  
NAME

\_\_\_\_\_  
DATE



**Section D – RESUME (to be completed by employee)**

Did you attach a typed copy of your resume? \_\_\_\_ Yes  
 Yes must be answered to proceed

**Section E – RELATIONSHIPS (to be completed by employee)**

Are any members of your immediate family or household employed by the FDNY?  YES  NO

If yes provide relationship, names, titles, rank, Bureau –

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Section F - CONVICTION RECORD (to be completed by employee)**

1. You must list all prior convictions and pending charges. You should NOT include Parking violations. A guilty plea is a conviction even if you were never imprisoned and only fined. You must also disclose if you were conditionally/ unconditionally discharged or received a Certificate of Relief from Disabilities. You do not have to disclose any material sealed or set aside under Federal and NY State law, or material pertaining to a youthful offender category. You may not be considered a youthful offender based on your age at the time of the offense. If you are unsure, list the offense.

YES  NO

3. Are there any criminal charges pending against you?

YES  NO

**LIST ALL CONVICTIONS AND/OR PENDING CHARGES BELOW:**

**DATE OF CONVICTION    TYPE OF OFFENSE    NAME & LOCATION OF COURT    SENTENCE/FINE**

DATE OF CONVICTION	TYPE OF OFFENSE	NAME & LOCATION OF COURT	SENTENCE/FINE

Add additional sheets, if necessary

COMMENTS –

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Section G– Oath or Affirmance and Acknowledgement (to be completed by employee)**

I hereby affirm that all statements are true and could be persecuted under penalty of perjury.

I also affirm that this certificate, if issued, is subject to the requirements of all applicable provisions including Fire Code 116-01

I also affirm that I will notify the FDNY in writing within 24 hours of changes regarding this form.

I also consent to a background check if requested by the FDNY.

\_\_\_\_\_  
 NAME

\_\_\_\_\_  
 DATE