

DOB NOW: *Licensing*

FALL 2024 RELEASE

HMO LICENSES

Industry Session

BEST PRACTICES FOR THE VIRTUAL CLASSROOM

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Chat Feature



Mute Microphones



Ask Questions



Parking Lot



Feedback



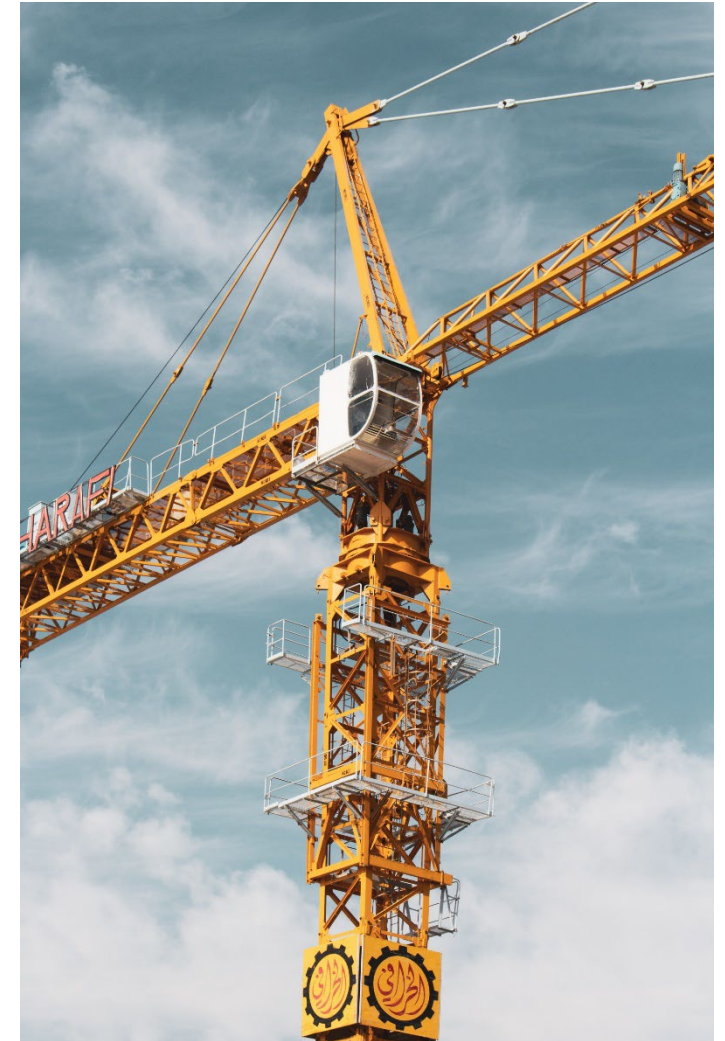
Participate

- Overview of Hoisting Machine Operator (HMO)
Licenses and Types of HMO Licenses
- Public Portal Application Search
- Required Documents
- Statuses
- Licensing Fees
- License Process Flow
- How to Log Into DOB NOW: *Licensing*
- New License Application Process
- Responding to Objections and Requesting
Reconsideration
- Getting the License
- Manage License
 - Renew License
 - Reissue License
 - Change Named Agent
 - Update Business Information
 - Update Designations
 - Add HMO B Ratings
- Manage Profile
 - Update Name
 - Update Address
- Important Notes

HOISTING MACHINE OPERATOR LICENSES

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- A **Hoisting Machine Operator (HMO)** License is required to operate certain cranes in New York City.
- HMO Licenses are issued by the New York City Department of Buildings (DOB) through **DOB NOW**, its self-service online tool. See nyc.gov/dobnowtips for how to register for a DOB NOW account.
- **Process Update:** as of October 16, 2024, all HMO License-related transactions are in **DOB NOW: *Licensing*** instead of **DOB NOW: *BIS Options***.



HOISTING MACHINE OPERATOR LICENSES – PROCESS UPDATE



As of October 16, 2024, **DOB NOW: *Licensing*** replaces **DOB NOW: *BIS Options*** for all **Hoisting Machine Operator (HMO)** License-related transactions.

Submission Date	Where to Submit
Prior to October 16, 2024	DOB NOW: <i>BIS Options</i>
On & after October 16, 2024	DOB NOW: <i>Licensing</i>

If an application has been submitted and is under review in DOB NOW: *BIS Options*, it will continue and does not need to be refiled in DOB NOW: *Licensing*.

HOISTING MACHINE OPERATOR LICENSES: NEW LIMITED LICENSES



- Beginning **November 7, 2024***, an HMO license issued by DOB will be required to operate an **articulating boom crane, mini crane, or rotating telehandler** in New York City.
- See [NYC Administrative Code §28-405.1](#), NYC Building Code [Sections 3316.1 and 3319.1](#) and [1 RCNY 3319-01\(i\)\(1\)](#) for details.
- Individuals who **submit an application** for a limited HMO license for those machines before November 7, 2024*, in DOB NOW: *Licensing* will be permitted to continue to operate the hoisting machine for which they submitted a license application while their application is pending.
- Beginning on the same date, individuals who have neither a pending application nor a DOB-issued HMO license will only be able to operate one of these machines if they are supervised by a licensed HMO with a DOB-issued license in accordance with [1 RCNY 104-23](#).

*A Service Notice will be posted if this information is updated.

HOISTING MACHINE OPERATOR – NEW LICENSES & TITLE CHANGES



- The 8 HMO License Classes in **DOB NOW: Licensing** include 3 new classes, and 5 from **BIS Options**.
- **Class C Licenses** have new titles, but the qualifications & requirements are the same as their previous titles.

DOB NOW: <i>Licensing</i>	BIS Options
▪ Class B	▪ Class B
▪ Class A	▪ Class A
▪ Class C	▪ Class C-1
▪ Limited license for Boom Trucks	▪ Class C-2
▪ Limited license for Sign Hanging Cranes	▪ Class C-3
▪ NEW! Limited license for Articulating Boom Cranes	
▪ NEW! Limited license for Mini Cranes	
▪ NEW! Limited license for Telehandlers	

HOISTING MACHINE OPERATOR LICENSES – PROCESS OVERVIEW

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To become an **NYC-licensed Hoisting Machine Operator**, applicants are required to:

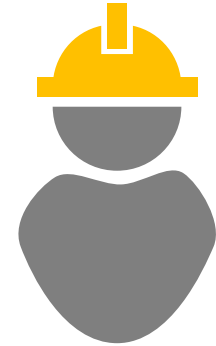
- Meet the **license criteria** (age, language, experience, etc.)
- Pass the appropriate National Commission for the Certification of Crane Operators (NCCCO) **examinations**
- Begin the application in **DOB NOW: Licensing**
- Upload all **required documentation**
- Pay the **New License (\$100)** and **Background Investigation (\$500)** fees
- **Submit** the license application
- Once DOB approves the application, an **appointment** is scheduled in DOB NOW: *Licensing* to take a photo and **pick up the HMO License Card**.
- An HMO License is valid for **three years**.

HOISTING MACHINE OPERATOR LICENSES - QUALIFICATIONS

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Applicants are required to meet these qualifications:

- Be at least **18 years old**
- Be able to **read and write the English language**
- Be **fit to perform the work authorized by the license**
- Have **good moral character**
- Have the **minimum required experience** operating a Hoisting Machine, for the number of years and under the conditions specified for your License Class, including those such as:
 - Supervision: directly, by a licensed Hoisting Machine Operator of a specified Class
 - Type, size, capacity, etc. of machine
 - Location/setting: New York City or an urban area of comparable density, at a jobsite, crane yard, or training center, etc.



Designations are additional certifications to operate specific types of machines. Applicants are required to include details of their Designations when applying for, updating, and renewing their license. Required Designations are:

- **Class B**
 - Lattice boom truck crane (LBT)
 - Lattice boom crawler crane (LBC)
 - Telescopic boom crane (swing cab) (TLL)
 - Telescopic boom crane (fixed cab) (TSS)
 - Lattice boom crane (LAT)
 - Tower crane (TWR)
- **Class A**
 - All of the above except Tower Crane



▪ HOISTING MACHINE OPERATOR LICENSES – DESIGNATIONS



Required Designations by License Class, continued:

▪ **Class C**

- Telescopic boom crane (swing cab) (TLL)
- Telescopic boom crane (fixed cab) (TSS)

▪ **Limited License for Boom Trucks**

- Telescopic boom crane (fixed cab) (TSS)

▪ **Limited License for Sign Hanging Cranes**

- Telescopic boom crane (fixed cab) (TSS)

▪ **Limited License for Articulating Boom Cranes**

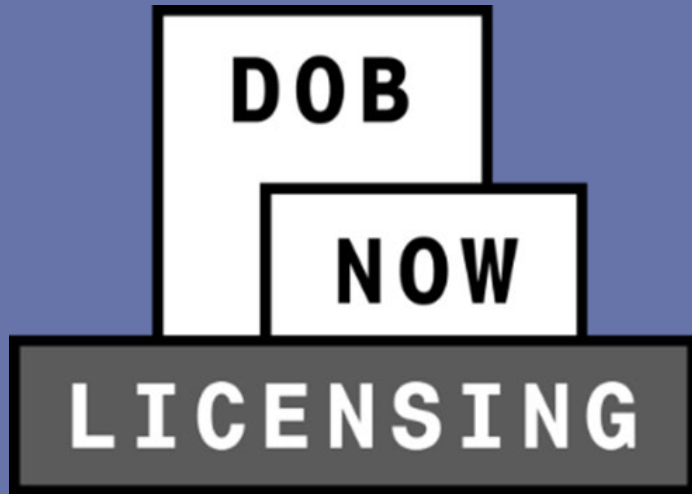
- Articulating Boom Cranes (ABC)
- Boom Crane with Winch (ABW)
- Articulating Boom Loader (ABL)

▪ **Limited License for Mini Cranes**

- Telescopic boom crane (fixed cab) (TSS)

▪ **Limited License for Telehandlers**

- Rotating Telehandler (THR)



HMO LICENSE CLASSIFICATION

Levels of License Classifications

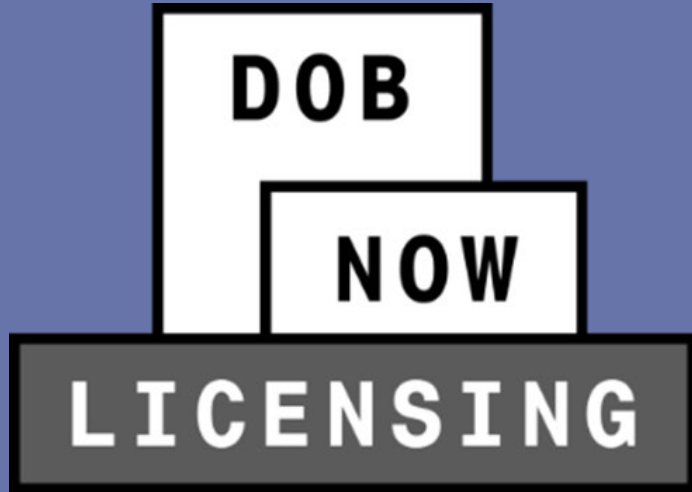
License Classes in DOB NOW: *Licensing*

- **B**
- **A**
- **C**
- **Limited license for Boom Trucks**
- **Limited license for Sign Hanging Cranes**
- **Limited license for Articulating Boom Cranes**
- **Limited license for Mini Cranes**
- **Limited license for Telehandlers**

- **Class B is the highest-ranking license, then Class A, then Class C.**
- You need a Class A license before you can apply for a Class B license.
- An operator **can hold or apply for only one Class B, Class A, or Class C License at a time.**
- For example, a Class C licensee can apply for a Class A License. On approval, the licensee's current license becomes a Class A License, and they will no longer hold a Class C License.
- For **Limited licenses** -- Boom Trucks, Sign Hanging Cranes, Articulating Boom Cranes, Mini Cranes, and Telehandlers -- **an operator can hold one or more at a time.**

HMO: LEVELS OF LICENSE CLASSIFICATIONS: SUMMARY

		LICENSE CLASS	CAPACITY	BOOM LENGTH	TYPE RESTRICTIONS
 The higher class can operate all machines in lower classes		B	Unlimited	Unlimited	None
		A	Unlimited	Up to 200'	None
		C	Up to 50 tons	Up to 200'	Wheel-mounted
 Class A, B, or C can operate all machines within limited license classes.	Licensees will be able to hold multiple limited licenses.	<ul style="list-style-type: none"> Limited license for Boom Trucks 	Up to 50 tons	Up to 200'	Boom Trucks
		<ul style="list-style-type: none"> Limited license for Sign Hanging Cranes 	Up to 3 tons	Up to 135'	Boom Trucks: Sign Hanging work only
		<ul style="list-style-type: none"> Limited license for Articulating Boom Cranes 	Up to 50 tons	Up to 200'	Articulating Boom Cranes
		<ul style="list-style-type: none"> Limited license for Mini Cranes 	Up to 3 tons	Up to 50'	Mini Cranes
		<ul style="list-style-type: none"> Limited license for Telehandlers 	Up to 50 tons	Up to 200'	Telehandlers



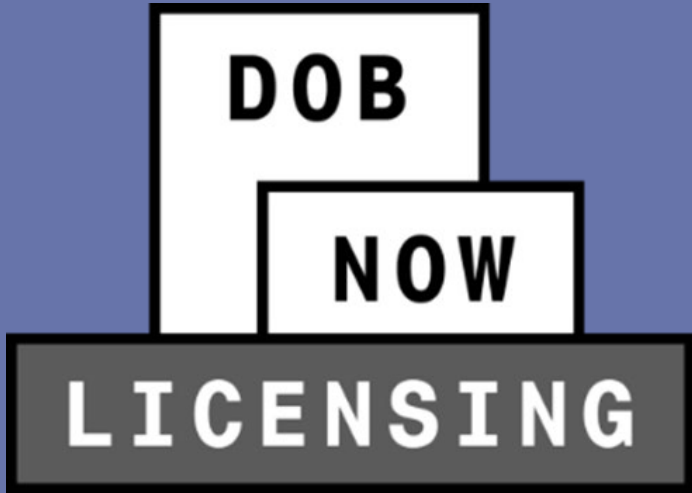
DOCUMENTS

LICENSES: REQUIRED DOCUMENTS



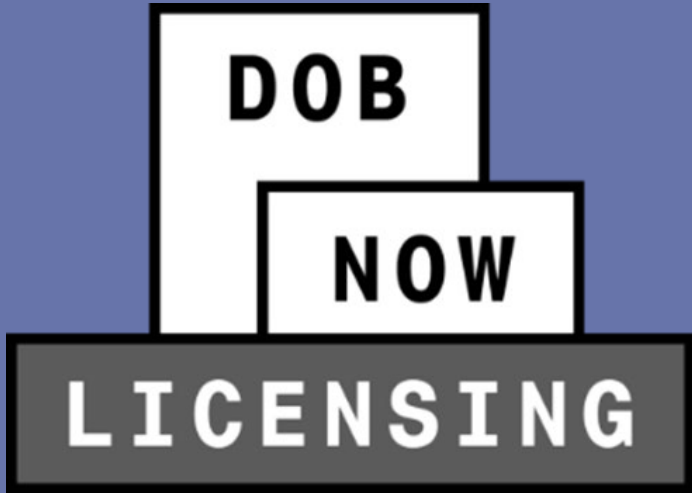
- An overview of what documents are required for New License Applications, Renewals, and Reissues can be found in the [Required Documents spreadsheet](#).

- Links to all resources are on the [DOB NOW: Licensing Resources page](#).



STATUSES

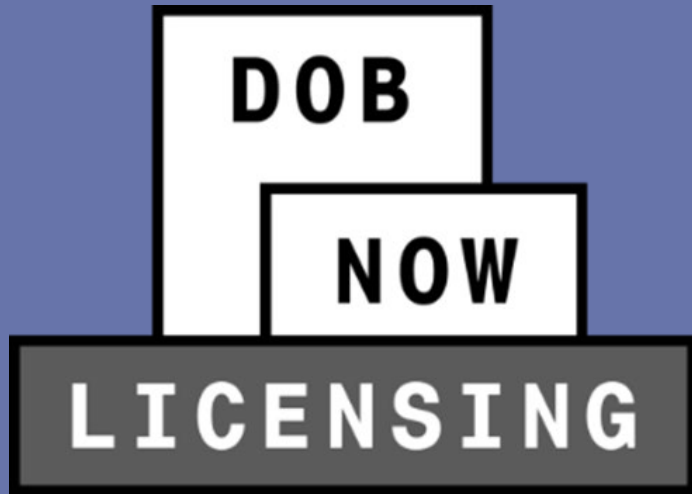
- All statuses that can apply to License Requests can be found in the [Licensing Statuses document](#).
- Links for all resources are on the [DOB NOW: Licensing Resources page](#).



FEES

- All License Request fees can be found in the [Licensing Fees document](#).
- **Late Fees** for License Renewal apply if the Renewal Request is filed:
 - 30 days or fewer before the Expiration Date of the License
 - Up to one year after the Expiration Date of the License

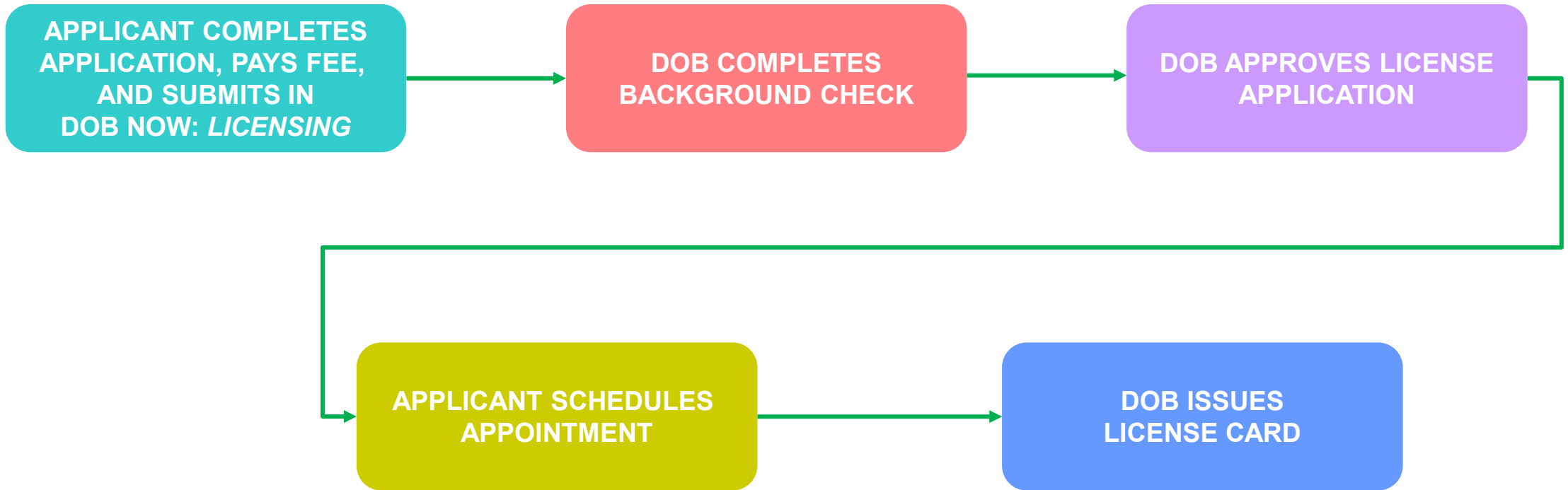
- Links for all resources are on the [DOB NOW: Licensing Resources page](#).

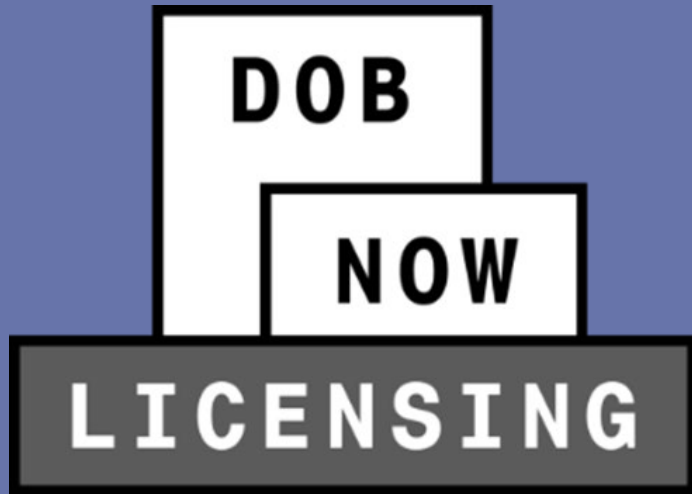


STEPS TO GET A LICENSE

STEPS TO GET A NEW LICENSE

- These are the steps for applying for any License.













PUBLIC PORTAL APPLICATION SEARCH

- A new **Application Search** on the Public Portal allows any member of the public to look up:
 - **DOB NOW Permits by Applicant**
 - **DOB NOW Licensing Application Number**

Search the Public Portal
FAQS | USER MANUAL

 Address	 Borough, Block, Lot	 BIN	 Job Number
 Device	Includes BIS Records  Licensee	 Violation	 Application Search

Application Search

Search by *

DOB NOW Permits by Applicant

DOB NOW Licensing Application Number

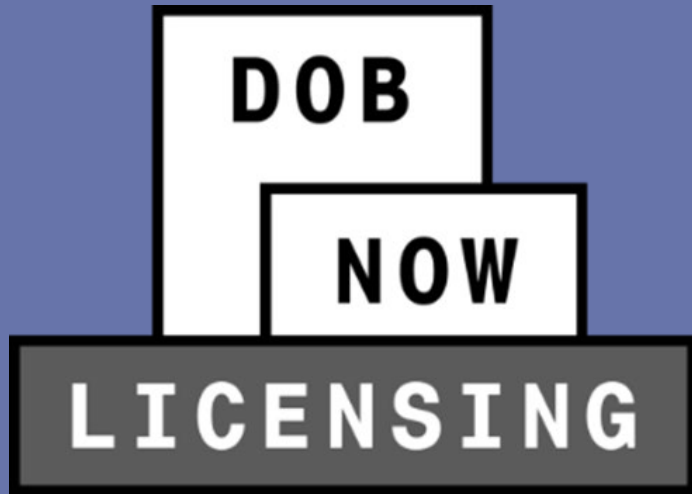
License Application Number *

License Application Status

Application Number L00018640	Application Status Application Approved
Applicant Name HMO License	License Type Lift Director
License Class/Class Type Not Applicable	Modified Date 09/13/2024

[Close](#)

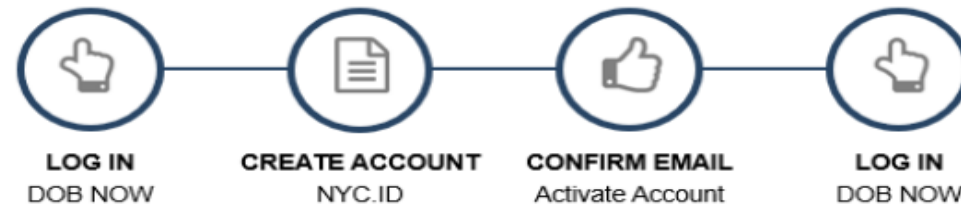
- Searching by a **License Application Number** will provide the details of the License Application.



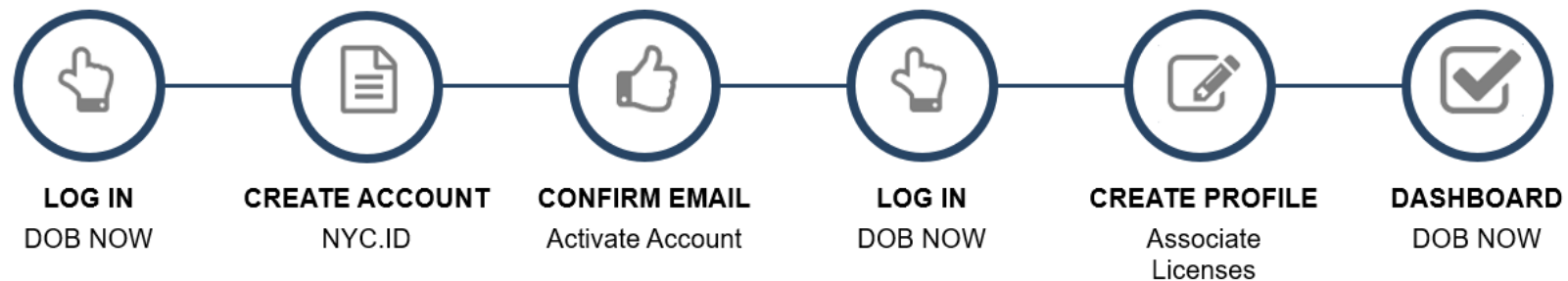
HOW TO LOG INTO DOB NOW: LICENSING

NYC.ID PROCESS OVERVIEW

- DOB NOW integrated with NYC.ID in June 2024, requiring all returning and new users to have a NYC.ID account to log into DOB NOW.
- One-time process for **Existing DOB NOW Users**:

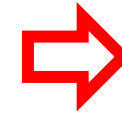


- One-time process for **New Users**:



DOB NOW LOGIN

- If you have an **eFiling Account, DOB NOW profile, or NYC.ID**, enter the same email address associated with all your filings in DOB NOW. You will be redirected to the NYC.ID registration page.
- If you do not already have an NYC.ID you will be directed to create one. If you already have an NYC.ID you will be directed to enter the password associated with your NYC.ID.
- For step-by-step guides and videos, visit nyc.gov/dobnowtips.



Log into DOB NOW to view, sign and submit jobs, filings, and applications.

Enter your NYC.ID email address:

Email

Login

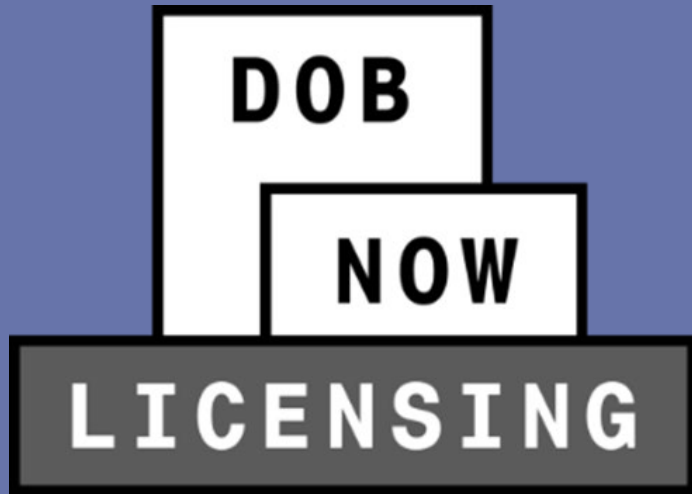
If you need an NYC.ID

Create Account

New login process as of June 3, 2024. Visit www.nyc.gov/dobnowtips for more information.

If you are a returning DOB NOW user who does not have a NYC.ID, select Create Account above and **use the same email address** as your eFiling account or DOB NOW profile to access your DOB NOW records.

Need more help? Contact us.

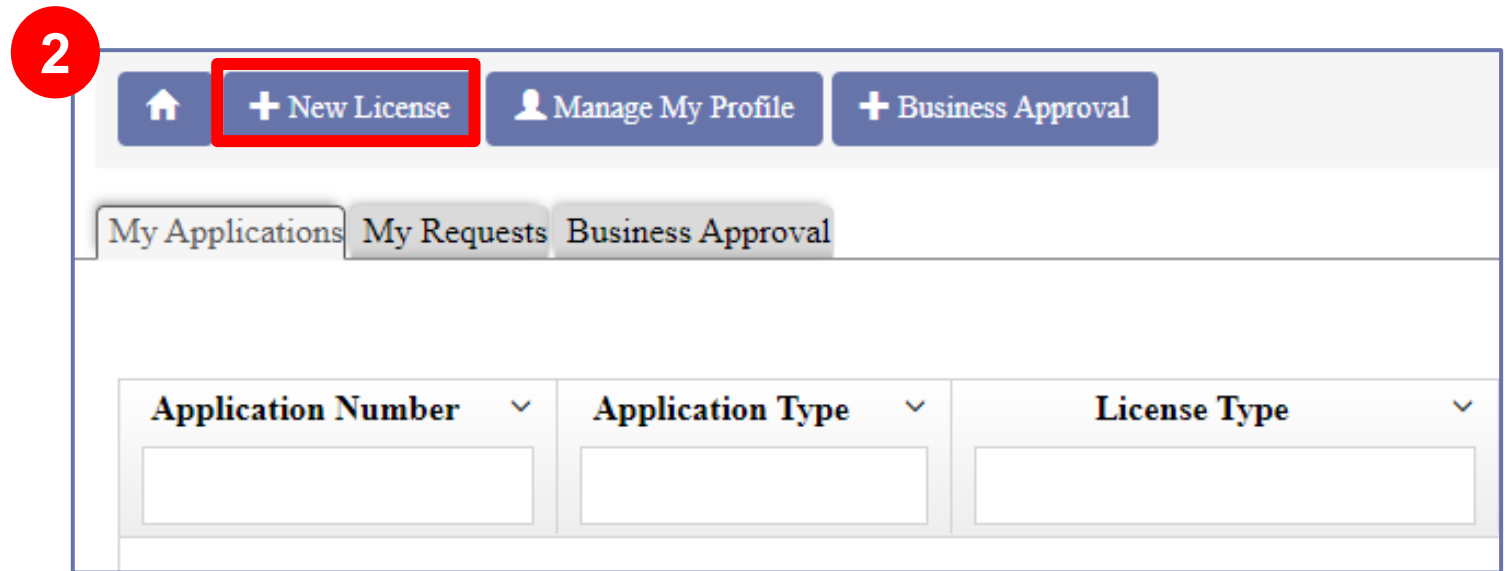
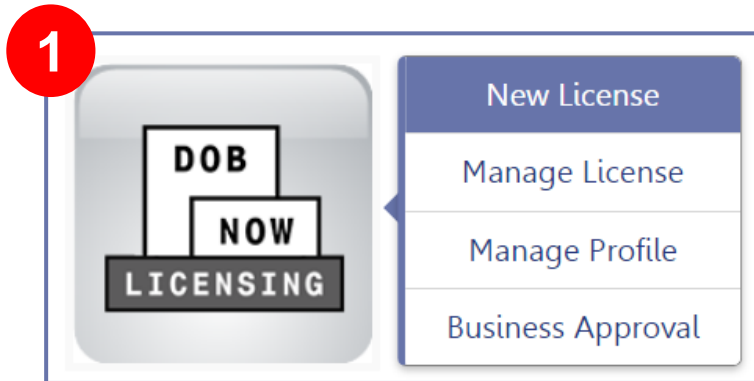


HOW TO APPLY FOR A NEW LICENSE

License Qualification Application Process

HOW TO APPLY FOR A NEW LICENSE

To apply for a new license, log into DOB NOW, hover over the **DOB NOW: Licensing** module and select **New License**. From the dashboard click the **+ New License** button to begin the application process.



- Select the radio button next to the License Type and then click **Next**. Depending on the License Type a **License Class/Class Type** may need to be selected. If so, select the radio button and click **Next**.

License Types

- Construction Superintendent
- Elevator Agency
- Gas Work Qualification Only
- Hoisting Machine Operator
- Journeyman
- Lift Director
- Site Safety
- Welder

NEW LICENSE – SUPPLEMENTAL INVESTIGATION QUESTIONNAIRE

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- Click the **appropriate answers** to all questions asked on the **Supplemental Investigation Questionnaire**.
- The questions differ depending on the License Type.
- Click **Submit** at the bottom of the pop-up window. Once the questionnaire is submitted, the information provided cannot be changed.

Supplemental Investigation Questionnaire

Are you at least eighteen (18) years old?*

Yes No

Are you fit to perform the work authorized by the trade?*

Yes No

Are you able to read and write the English language? *

Yes No

Are you of good moral character?*

Yes No

Do you hold the national certification(s) (e.g. NCCCO) required for this license per 1 RCNY 104-09(d)?*

Yes No

Do you have at least two (2) years of experience, within the three (3) years prior to submitting this application, operating hoisting machines in accordance with the requirements of 1 RCNY 104-09(a)(4)(ii). Further, I have completed the outrigger placement requirements of 1 RCNY 104-09(a)(5)?

If **within NYC**, under the direct and continuing supervision of a Class A, B, or C Hoisting Machine Operator licensed by the Department, and including outrigger placements incorporation at least one hundred (100) crane set ups.

If **outside of NYC**, under the direct and continuing supervision of a Hoisting Machine Operator licensed in an urban area of comparable density within the United States that regulates cranes, including outrigger placements incorporating at least one hundred (100) crane set ups.

-At least one year of the qualifying two (2) years of experience above must have been in New York City or in an urban area of comparable density within the United States. *

I have at least one (1) year of experience, within the five (5) years prior to submitting this application, operating mini cranes in New York City in accordance with the requirements of 1 RCNY 104-09(a)(4)(iii). *

Yes No

NEW LICENSE – GENERAL INFORMATION

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Enter all the required fields on the General Information tab, including (if not auto populated):

- Home Telephone Number
- Borough
- Personal Information
- Filing Representative or Preparer information if desired.

General Information

Application Information

Application Type* New License License Type* Hoisting Machine Operator License Class/Class Type* Class A

Applicant of Record

First Name* HMO Middle Initial Last Name* License

Email* hmolicense01@gmail.com

Address

House Number* 280 Street Name* Broadway Apartment/Building Number

Personal Information

Date of Birth* 12/31/1993 SSN/ITIN* XXX-XX-5555

Filing Representative Class I/Preparer

Email Enter email/username... Registration Number First Name

Middle Initial Last Name Business Name

Business Telephone Business Address City

State Zip Code

NEW LICENSE – GENERAL INFORMATION (NO DOB LICENSE)

- If you do not have a DOB license, General Information is auto populated from your NYC.ID and DOB NOW Account.
- **To change your name or email address**, select Manage/Associate Licenses from the person icon in the top right corner. Then select the link in **update your NYC.ID account**.

The screenshot displays the DOB NOW user interface. At the top, it says "DOB NOW" and "NYC Department of Buildings self-service online for permits, appointments and applications". The user is logged in as "ADAM JOE2" with email "AJOETEST2@GMAIL.COM". A dropdown menu is open, showing "Manage/Associate Licenses" (highlighted in red), "Need Help?", and "Sign Out".

The main content area is titled "Account Details" and contains a message: "To change your name or email address in Account Details: **update your NYC.ID account** after the change is made in NYC.ID, the new information will populate in DOB NOW the next time you log in. If you change your email address in NYC.ID, all your findings (new and existing) in DOB NOW will update with the new email address." The link "update your NYC.ID account" is highlighted in red.

Below the message, the user's name "ADAM JOE2" and email "Email: ajoetest2@gmail.com" are displayed. To the right, there is a "License Types Information" button.

The "Address Information" section is highlighted with a red box and includes an "Edit" button (also highlighted in red). The address details are as follows:

Business Name	House Number	Street Name
AJ2	Not Available	Not Available
City	State	Zip Code
NYC	NY	10000
Business Telephone	Mobile Phone	
(201) 222-3333	Not Available	

- **To change your address information**, select the **Edit** button.

NEW LICENSE – GENERAL INFORMATION (EXISTING DOB LICENSE)



- If you have an **existing DOB license**, the General Information section will be auto filled from that license information.
- To update license name or address information, follow the instructions in the [Manage Profile](#) section of this presentation.

NEW LICENSE – COMPLETE & SAVE APPLICATION

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- Mark whether you are a **City Employee** to complete the General Information tab.
- After clicking **Save**, a **Notification** will display which information cannot be changed after saving. To move forward, select **Save** again.
- Click **OK** to confirm the application has been saved.

City Employee

Are you a City Employee?*

Yes No

Notification

Please note that the below information cannot be changed after saving:

Application Type: New License

License Type: Hoisting Machine Operator

License Class/Class Type: Limited License Mini Cranes

Email: HMOLICENSE01@GMAIL.COM

Save Cancel

Notification

Application has been saved.

OK

HOW TO APPLY FOR A NEW LICENSE

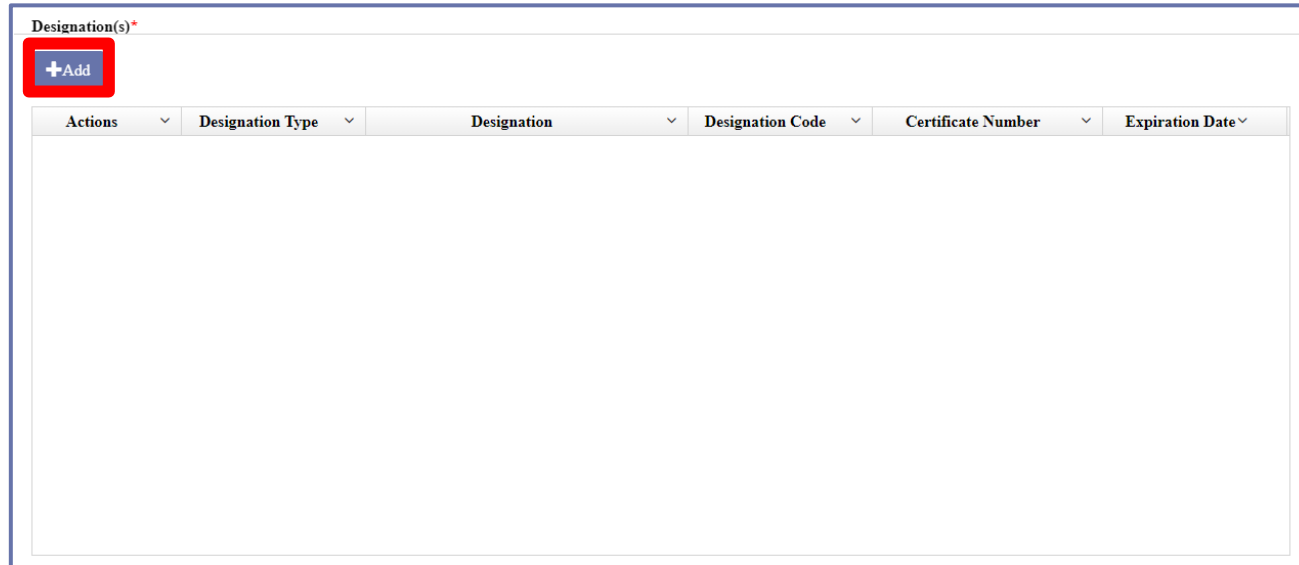
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- Once the Application has been saved, the General Information tab will display all **existing DOB NOW HMO Licenses** for the user.

Existing License Type					
License Number	License Type	License Class	Issue Date	Expiration Date	Status
H - 015057	Hoisting Machine Operator	Class A	04/02/2024	04/02/2027	Inactive

HOW TO APPLY FOR A NEW LICENSE

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The screenshot shows a web form titled "Designation(s)*". In the top-left corner of the form area, there is a blue button with a white plus sign and the text "+Add", which is highlighted with a red rectangular border. Below the button is a table with a header row containing six columns: "Actions", "Designation Type", "Designation", "Designation Code", "Certificate Number", and "Expiration Date". Each column header has a small downward-pointing chevron icon to its right. The table body is currently empty.

- A new **Designation(s)** section will also appear on the General Information tab.
- Click **+Add** to enter a Designation.

HOW TO APPLY FOR A NEW LICENSE

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Please enter each designation listed on your card below:

Designation Type*
NCCCO

Designation Description*
[Empty dropdown menu]

Designation Code*
[Empty text field]

Certificate Number*
[Empty text field]

Expiration Date*
[Empty date field with calendar icon]

[Save] [Cancel]

- Select the **Designation Description** from the drop-down menu. The options in the menu will depend on the License Type. Required Designations appear in **red**. All required Designations must be added to proceed.

Designation Description*

[Dropdown menu with options]

- Telescopic Boom Cranes - Fixed Cab
- Telescopic Boom Cranes - Swing Cab
- Articulating Boom Cranes
- Boom Crane w/Winch
- Articulating Boom Loader
- Dedicated Pile Driver
- Rotating Telehandler

- Enter **Certificate Number** and **Expiration Date**.
- Click **Save**.

HOW TO APPLY FOR A NEW LICENSE

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The screenshot displays a web application interface. At the top, a blue banner contains the text 'HOW TO APPLY FOR A NEW LICENSE' and a 'DOB NOW' badge. Below the banner, a table titled 'Business Information' is visible. The table has columns for 'Actions', 'Business Information Type', 'Business Name', and 'Business ID'. A red box highlights a '+ Add Business Information' button in the top-left corner of the table. A pop-up window titled 'Business Information' is overlaid on the table. This window contains several input fields: 'Business Type*' (a dropdown menu with 'Select Business Type'), 'Business Name*' (a text input), 'Business Address*' (a text input), 'City*' (a text input), 'State*' (a dropdown menu with 'Select'), 'Zip*' (a text input), 'Business Email*' (a text input with placeholder text 'Enter email/username...'), and 'Business Phone*' (a text input). At the bottom of the pop-up window, there are two buttons: 'Save' (highlighted with a red box) and 'Cancel'.

- Once the Application is saved, an optional Business Information section appears. Click **+Add Business Information**.
- Enter data in pop-up window and click **Save**. Repeat as needed.

HOW TO APPLY FOR A NEW LICENSE

- Enter **License Use** information.
- **Partner or Officer Information** will become active once the application is saved.
- Click **+Add** to enter that information.

License Use*

Select a value

Select a value

Individual/Sole-proprietor

On Behalf of a Corporation

On Belalf of a Partnership

On Behlaf of a City Agency

Partner or Officer Information

+ Add

Name	Street Address	License Number	% Control	Actions
------	----------------	----------------	-----------	---------

Total Items: 0

1 / 1 10 Items Per Page

HOW TO APPLY FOR A NEW LICENSE

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- The **Partner or Officer Information** pop-up window will appear.
- Enter all information for each Partner or Officer.

Partner or Officer Information

Name*	Street Address*	City*
<input type="text"/>	<input type="text"/>	<input type="text"/>
State*	Zip Code*	Phone*
<input type="text" value="Select:"/>	<input type="text"/>	<input type="text"/>
License Number	% Control*	Title(s)*
<input type="text"/>	<input type="text"/>	<input type="text"/>

NEW LICENSE – NAMED AGENT

- Applicants who live outside of NYC are required to have a **Named Agent**. Applicants within the five boroughs may choose to designate a Named Agent.
- Enter **Named Agent Information** and **click the checkbox** to attest to the role.

Named Agent Information

Do you have a Named Agent? Yes No

First Name*	Middle Initial	Last Name*
<input type="text"/>	<input type="text"/>	<input type="text"/>
House Number*	Street Name*	Apartment/Building Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
City*	Borough*	State*
<input type="text"/>	Select ▼	Select ▼
Zip Code*	Email*	
<input type="text"/>	<input type="text" value="Enter email/username..."/>	

I hereby agree that the above Named Agent may accept service of Notices of Violation (NOV)/Summonses issued by the New York City Department of Buildings (DOB). I also agree that service to this Agent at the address listed above shall be deemed to be valid service of the NOV's/Summonses under New York City Charter 1049-a, section 6-08 of the rules of OATH Hearings Division and other applicable laws to allow for the docketing of judgments. I further agree not to raise any defect with respect to service for any NOV's/Summonses received from DOB at the address above, in any forum, including before a hearing officer of OATH/ECB, the Environmental Control Board itself, or in any court of law.

I have personally reviewed all information entered on this application. I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.*

Name	Date
<input type="text"/>	<input type="text"/>

Named Agent Information

Do you have a Named Agent? Yes No

I acknowledge that failure to designate an agent in New York City (NYC) or maintain a NYC address for receipt of service, constitutes a waiver of any challenges to service of process.

I have personally reviewed all information entered on this application. I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.*

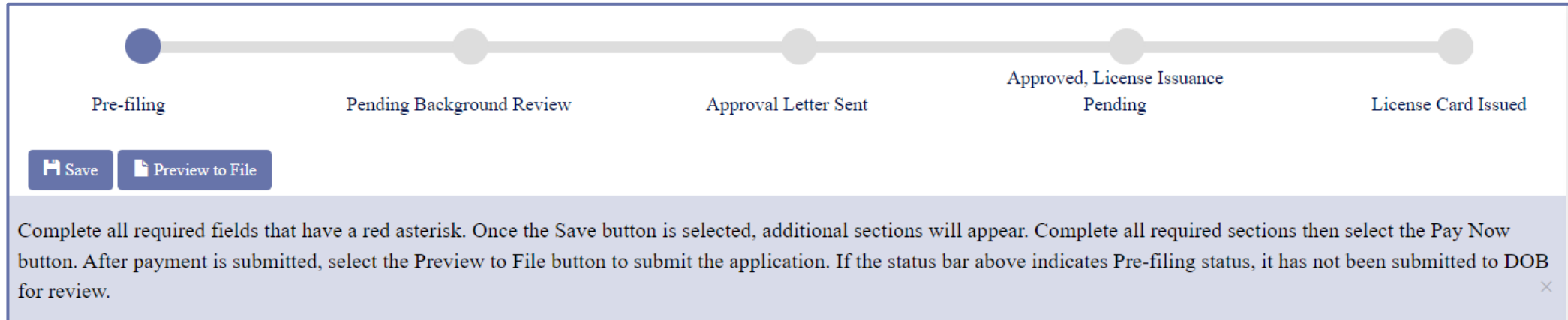
Name

Date

- If you choose not to have a Named Agent, there is a different **Attestation** that you must click on.

NEW LICENSE – STATUS BAR

DOB
NOW



- After the Application is submitted, a warning will appear at the top of the page: “Complete all required fields that have a red asterisk. Once the Save button is selected, additional sections will appear. Complete all required sections then select the Pay Now button. After Payment is submitted, select the Preview to File button to submit the application. If the status bar above indicates Pre-filing status, it has not been submitted to DOB for review.”

L00013220

General Information

Background Investigation

Qualifications/Experience

Child Support Certification

Documents

Statements and Signature

- A License Application number will be assigned.
- Five more tabs will appear to be completed:
 - **Background Investigation**
 - **Qualifications/Experience**
 - **Child Support Certification**
 - **Documents**
 - **Statements & Signature**

NEW LICENSE – BACKGROUND INVESTIGATION

DOB
NOW

L00013220

General Information

Background Investigation

Qualifications/Experience

Child Support Certification

Documents

License History*

+ Add History

List all licenses, certifications, or registrations issued to you, by any City or State.

Name	Type	License/Certification/Reg...
------	------	------------------------------


- Go to the **Background Investigation** tab and then click the **+ Add History** button to enter details of any license, certification, or registration issued to the applicant by any city or state.
- At least one License, Certification, or Registration is required in this section.

NEW LICENSE – BACKGROUND INVESTIGATION

DOB
NOW

- For each license, **enter**:
 - Name
 - Type
 - License/Certification/Registration Number
 - Current Status
 - Expiration Date
 - Then click **Save**.

License History

Name*	Type*	License/Certification/Registration Number*
<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Status*	Expiration Date*	
<input type="text" value="Select"/>	<input type="text"/> 	

NEW LICENSE – BACKGROUND INVESTIGATION

DOB
NOW

Do you currently have a valid Driver's License? * Yes No

State where Issued* Driver's License Number*

Have any license application(s) ever been denied to you by the Department of Buildings or any other Government entity?* Yes No

Have any licenses or privileges granted to you or your associated business(es) by the Department of Buildings or any other government entity ever been rescinded, revoked, surrendered, suspended or have you or your related business(es) ever been disqualified from performing inspections? If Yes please indicate the type of license/certification/registration with the reason for the suspension, restriction, surrender, revocation, or disciplinary action in the Comments. * Yes No

- If the applicant has a **Driver's License**, enter the state and number of the license.
- If any licenses or government-granted privileges have ever been denied, rescinded, revoked, surrendered, suspended or disqualified, explain the details in the **Comments**.

NEW LICENSE – BACKGROUND INVESTIGATION

DOB
NOW

- In the **Personal Information** section, answer if you have ever been known by any other names. If yes, click the **+ Add History** button to enter any prior names.
- Click **Save** when done.

Personal Information*

+ Add History

List of other names you are known by:

Last Name	First Name

Personal Information

Last Name*

First Name*

Middle Name

Social Security Number*

Save **Cancel**

NEW LICENSE – BACKGROUND INVESTIGATION

DOB
NOW

Have you ever been employed by a city, state or federal govt agency? *

Yes No

Are you related to any DOB employee(s) including through marriage? *

Yes No

If you answer YES to any of the questions in this section, you must provide complete details, specifying the date, agency, reason, disposition, etc. in the Comments box.

Comments

500 characters remaining

- Answer the **Yes/No questions** about whether the Applicant has worked for a city, state or federal government agency and whether they are related to any DOB employee(s).
- Any **YES** answers, either here or above, require an explanation in the **Comments** field.

NEW LICENSE – BACKGROUND INVESTIGATION

DOB
NOW

- Enter the full address of all residences where the applicant has lived for 3 or more months in the past 10 years (or since they graduated high school, whichever is less).
- Click the **+ Add Residence** button.
- Enter the most recent address information and click **Save**.
- Click **OK** to complete the process.
- Repeat as many times as necessary.

Residence*

Starting with your present address and working back, list the full address of every place you have resided for more than a three (3) month period. List only your residences over the past ten (10) years or since you left high school, whichever is less.

+ Add Residence **1**

From	To	Street Address

Residence

From*

To*

This is my current address

Street Address*

City*

State*

Zip Code*

2

Notification

Residence has been added.

3

NEW LICENSE – QUALIFICATIONS & EXPERIENCE

DOB
NOW

- Click on the **Qualifications/Experience** tab.
- Answer the three Yes/No questions about **Convictions and Fines**.
- If there are any **Yes** answers, a new tab will appear when the application is saved: **Supplemental Affidavit**. Explain the Yes answers in that new tab.

The screenshot shows a web application interface for a license application. At the top left, there are two buttons: 'Save' and 'Preview to File'. Below these is a sidebar menu with the following items: 'L00001632', 'General Information', 'Background Investigation', 'Qualifications/Experience' (highlighted with a red border), 'Documents', and 'Statements & Signature'. The main content area is titled 'Convictions and Fines' and contains three questions, each with 'Yes' and 'No' radio button options:

- Have you ever been convicted or pled guilty to an offense anywhere (an offense is defined as a violation, misdemeanor, or felony)?*
- Do you owe any penalties or fines to the City of New York?*
- 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?*

Below the 'Convictions and Fines' section is the 'Employment History*' section, which includes a '+ Add Employment History' button.

NEW LICENSE – QUALIFICATIONS & EXPERIENCE

DOB
NOW

- Enter employment history for each job the applicant is using as **Qualifying Experience**.
- Click the **+ Add Experience** button and enter work history, starting with the current job and then going in *reverse chronological order*.



Provide a valid **Supervisor(s) Telephone Number** for experience verification.

Employment History Information*

+ Add Experience

City Agency or Trade Business Name	Address	Telephone


NEW LICENSE – QUALIFICATIONS & EXPERIENCE


DOB
NOW

- Enter all required information on the **Employment Information** tab.

Employment History Information

Employment Information Wages Detail

Date Employed From* 


Date Employed To* 

This is my current job

Company Name*

Street Address*

City*

State* 

Zip Code*

Country*

Ownership Interest (%)*

Is the company still in business?

Supervisor(s) Name*

Supervisor(s) Title*

Supervisor(s) License Type*

Supervisor(s) License Number*

Supervisor(s) Telephone Number*

Supervisor(s) Email Address*

Reason for leaving*

250 characters remaining

NEW LICENSE – QUALIFICATIONS & EXPERIENCE

DOB
NOW

Employment History Information

Employment Information **Wages Detail**

Applicant Title* Time Period* Wages Per Hour*

Hours Per Week*

Describe Type of Work Performed*

250 characters remaining

Add

Applicants Name	Time Period	Hours Per Week	Wages Per Hour ...	Actions

- On the **Wages Detail** tab, enter Title, Time Period, Wages per Hour, Hours per Week, and Description of Type of Work Performed.
 - Click **Add**.
 - Repeat for other titles held at that company.
 - Click **Save** to complete entry.
- *Additional Experience Verification may be required depending on the License Type.

HOW TO APPLY FOR A NEW LICENSE

DOB
NOW

Experience Verification Form *

+ Add Experience

Please enter all of your crane work experience, describing machinery operated on while under direct supervision.

Crane Device Number	Machine Make	Machine Model	Start Date ▼	End Date ▼	Number of Crane se
---------------------	--------------	---------------	--------------	------------	--------------------

Summary of Experience

Total Number of Years: 0 Year(s) Total Number of Months: 0 Month(s) Total Number of Calender Days: 0 Day(s)

Overall Total Number of Crane Set-up: 0

- In the **Experience Verification Form** section, click **+Add Experience** to enter crane work experience, including describing the machinery operated.

- The **Experience Verification** pop-up will ask “Do you have a Department of Buildings (DOB) issued Crane Notice Number or a Crane Device Number?”
- For **Yes** answers, enter the **CN#** or **CD#** to search the database.

Experience Verification

Do you have a Department of Buildings (DOB) issued Crane Notice Number or a Crane Device Number? *

Yes No

Search By Crane Notice Number (CN#) Or Crane Device Number (CD#)

Crane Notice Number (CN#) Crane Device Number (CD#)

HOW TO APPLY FOR A NEW LICENSE

DOB
NOW

- The window will show the search results.
- Enter all required information and click **Save**.

Experience Verification

Do you have a Crane Notice Number (CN#) or Crane Device Number (CD #) issued by DOB? * Yes No

Search By Crane Notice Number (CN#) Or Crane Device Number (CD#)

Crane Notice Number (CN#) Crane Device Number (CD#)

Provide the specific time period of operation of a crane under the supervision of a licensed Hoisting Machine Operator.

	Start Date*	End Date*	Days worked for Time period	Number of Crane setups*
<input type="checkbox"/> CD00008873	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Was the operation in connection with building or infrastructure construction, alteration, or demolition work, the installation or removal of temporary structures or temporary construction installations, or the delivery or retrieval of materials, equipment, or other items to/from a building, but excluding work in industrial or commercial plants or yards? * Yes No

Was Jib Utilized? * Yes No

License Class of Witness* License Number of Witness*

HOW TO APPLY FOR A NEW LICENSE

Hide Details ▾

License Class of Witness*
Select License Class ▾

Was Jib Utilized?*
 Yes No

Crane Device Details

Crane Device Number CD00008873		
Machine Make klhjbkvuy	Machine Model 12/2024	Equipment Type Mast Climber
BoomType information	Actual Boom (ft) 0	Maximum Capacity 2
Capacity Units Kips	Actual Rated Capacity 1	Carrier Type Not Applicable
Location where you operated this machine		
State New York	City New York City	

- Clicking **Show Details** will display all the Crane Device details from the DOB database.
- Select **Hide Details** to close.

HOW TO APPLY FOR A NEW LICENSE

DOB
NOW

Experience Verification

Do you have a Department of Buildings (DOB) issued Crane Notice Number or a Crane Device Number? * Yes No

Crane Device Number* Machine Make* Machine Model*

Equipment type*

The time period being inputted should reflect the specific time the applicant operated the crane under the supervision of a licensed HMO.

Start Date* End Date* Days worked for Time period

BoomType information* Actual Boom (ft)* Maximum Capacity*

Was Jib Utilized?* Yes No Capacity Units* Actual Rated Capacity*

Carrier Type* Number of Crane setups*

Location where you operated this machine

State* City* License Class of Witness*

Select Select License Class

- If the Applicant answers **No** to the initial question, more questions will appear.
- Fill out all required fields and click **Save**.

- The **Supplemental Investigation Questionnaire** displays the answers selected when initiating the application.
- This section is read-only and cannot be edited.

Supplemental Investigation Questionnaire ▼

Are you at least eighteen (18) years old?*

Are you fit to perform the work authorized by this license/qualification?*

Are you able to speak and write the English language?*

Are you of good moral character?*

Do you hold the national certification(s) (e.g. NCCCO) required for this license per 1 RCNY 104-09(d)?*

I have at least one (1) year of experience, within the five (5) years prior to submitting this application, operating (((insert articulating boom cranes, mini cranes, or rotating telehandlers as warranted for the license))) in New York City in accordance with the requirements of 1 RCNY 104-09(a)(4)(iii). (link to webpage) *

Child Support

Are you under a court or administrative order to pay child support?* Yes No

Child support account number(s)*

Do you owe arrears equal to 4 months or more of child support payments* Yes No

Select the statement that apply to you*

(A) I am making payments by income execution or by court agreed payment/repayment plan or by a plan agreed to by the parties.

(B) My child support obligation is the subject of a pending court proceeding.

(C) I am currently in receipt of Public Assistance or Supplemental Security Income.

(D) None of the above statements apply to me. Please upload Verification Letter in the documents section.

- On the **Child Support Certification** tab, answer the Yes/No question(s).
- Any **YES** answers will open additional questions to answer.

NEW LICENSE – SUPPLEMENTAL AFFIDAVIT

DOB
NOW

- The **Supplemental Affidavit** tab appears only if **Yes** is answered to questions about **Convictions** or **Penalties and Fines** on the Background Investigation tab.
- Enter details as appropriate.

L00013402

General Information

Background Investigation

Qualifications/Experience

Child Support Certification

Supplemental Affidavit

Documents

Statements and Signature

Convictions*

[+Add Convictions](#)

Date of Conviction ▾

Penalties and Fines*

[+Add Penalties and Fines](#)

Conviction Details

Date of Conviction*

Charge or Offense*

250 characters remaining

Name of Court*

Location of Court*

Sentence or Disposition*

500 characters remaining

- Enter data into the **Conviction Details** pop-up:
 - Date of Conviction
 - Charge or Offense
 - Name of Court
 - Location of Court
 - Sentence or Disposition

- Enter details on the **Penalty and Fine Details** pop-up:
 - Debtor (Self or Company)
 - Company
 - Amount Owed
 - New York City Agency/Authority (Sanitation, Fire Department, DEP, NYPD, Buildings or Other)

Penalty and Fine Details

Debtor*

Select

Company

Amount Owed*

\$

New York City Agency/Authority*































Select

Save Cancel

- All required documents will be listed on the **Documents** tab.
- Click the **Upload** button to add a document.

Required Documents

+ Add Document

Actions	Document Type	Document Status	Comment
  	Social Security card	Required	
  	National Certification Practical Exam Results	Required	
  	NCCCO Certification Card	Required	
  	Social Security history of earning	Required	
  	Current Drivers License	Required	
  	Current Drivers Abstract	Required	
  	Latest paystub or W2	Required	
  	Substance Abuse Lab Consent Form	Required	
  	LIC 61 Physical Examination Form	Required	
  	Experience Verification Forms	Required	

1 / 2 10 Items Per Page 1 - 10 of 11 items

See the [Licensing Required Documents](#) for an overview of what documents are required for **New License Applications**.

Upload a Document

Document Type*

Experience Verification Forms



Document

Choose File No file chosen

Upload Cancel

Required Documents

+ Add Document

Actions	Document Type
  	Social Security card

- Click **Choose File** to navigate to the document on your computer.
- Click **Upload** to complete the upload process for the document.
- The **+Add Document** button may be used to add **Additional Supporting Documents**.

Documents Removed By User*

Actions	Document Type	Document Status
	Additional Supporting Document 1	Removed By User

1 - 1 of 1 items

- If an Additional Supporting Document is removed while the license application is in **Objections** or **QA Failed** status, the removed document will appear in the **Documents Removed By User** section.

L00001632

General Information

Background Investigation

Qualifications/Experience

Documents

Statements & Signature

Applicant of Record - Statements & Signature

License Application*

As a condition of being granted a license/registration and/or qualification from the New York City Department of Buildings, I attest that I comply with all New York City Administrative Code and Department rules, regulations, and directives governing how licensees/ registrants/qualification holders conduct their specific trade.

I have reviewed the information provided in this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any statement made to the Department is a misdemeanor and that it is also unlawful 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/registration and/or qualification.

In the event of an accident that involves my actions undertaken in connection with my license/registration and/or qualification, 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.

I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.*

Name

Date

- On the **Statements & Signature** tab, the Applicant clicks the checkbox to **Sign** the application.

- Additional attestations will appear for:
 - **Background Investigation**
 - **Voluntary Authorization for Service of Process by Email**
 - **Substance Abuse Attestation**
 - **Authorization for Service of Process by Agent**
 - **Statement and Signature (SIQ)**
 - **Child Support**
- Answer all attestations appropriately.

NEW LICENSE – PAY FEE

DOB
NOW

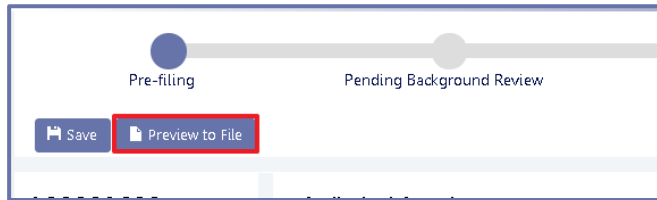
- Click the **Pay Now** button at the bottom of the toolbar on the right to pay the fee.
- Pay the amount **in full**. Partial payment is not an option.

The screenshot displays a web application interface for a new license application. At the top, a progress bar shows five stages: Pre-filing (active), Pending Background Review, Approval Letter Sent, Approved, License Issuance Pending, and License Card Issued. Below the progress bar are 'Save' and 'Preview to File' buttons. A text box provides instructions: 'Complete all required fields that have a red asterisk. Once the Save button is selected, additional sections will appear. Complete all required sections then select the Pay Now button. After payment is submitted, select the Preview to File button to submit the application. If the status bar above indicates Pre-filing status, it has not been submitted to DOB for review.' On the left, a sidebar menu lists sections: General Information, Background Investigation, Qualifications/Experience, Child Support Certification, Documents, and Statements and Signature (selected). The main content area is titled 'Licensee - Statements & Signature' and contains a 'License Application *' section with a disclaimer: 'As a condition of being granted a license/registration and/or qualification from the New York City Department of Buildings, I attest that I comply with all New York City Administrative Code and Department rules, regulations, and directives governing how licensees/ registrants/qualification holders conduct their specific trade.' Below this is a longer disclaimer: 'I have reviewed the information provided in this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any statement made to the Department is a misdemeanor and that it is also unlawful 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/registration and/or qualification.' On the right, a vertical toolbar contains icons for Dashboard, Application Highlights, View Filing, Trace History, Payment History, and a '\$600.00 Pay Now' button, which is highlighted with a red box.

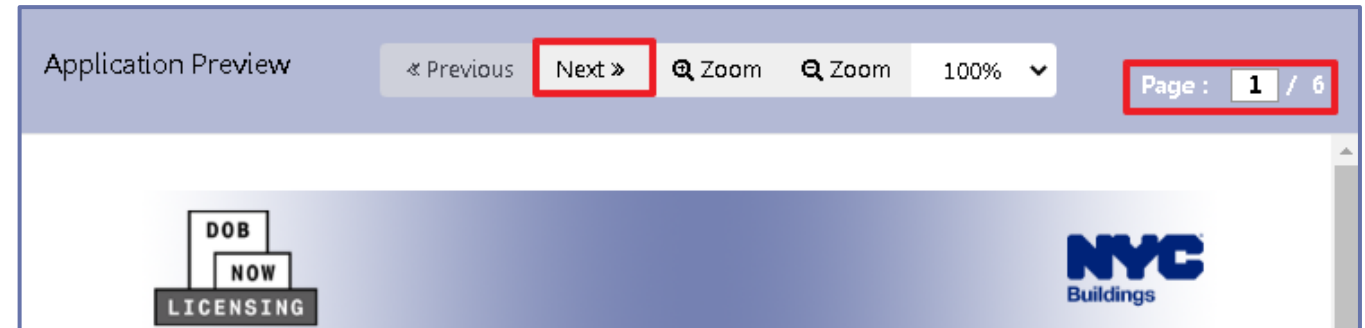
NEW LICENSE – FILE APPLICATION

DOB
NOW

- Click on the **Preview to File** button to submit your License Application.



- After the **Application Preview** window opens, review the entire application and page through the preview by clicking the **Next** button.
- Click the checkbox to sign the filing, and then click **File**.

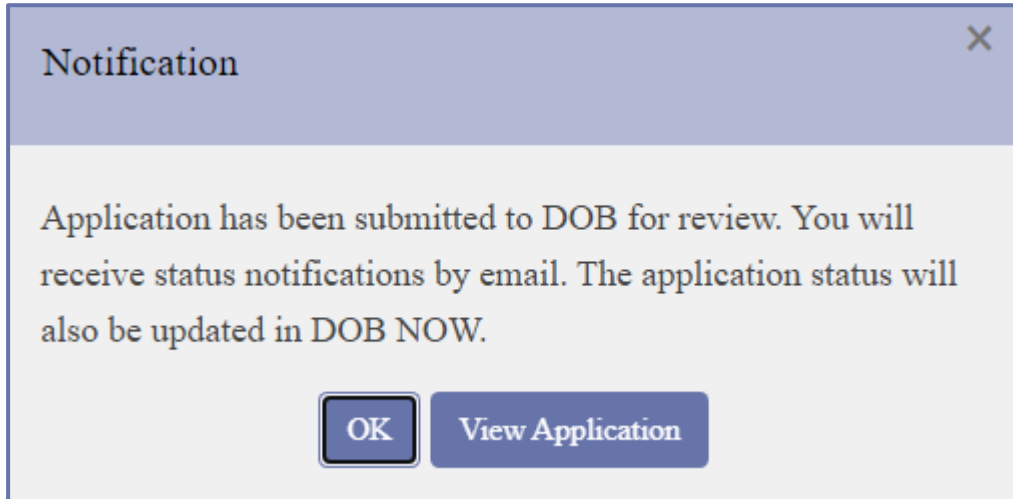


I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

Name Date
(Electronically Signed)

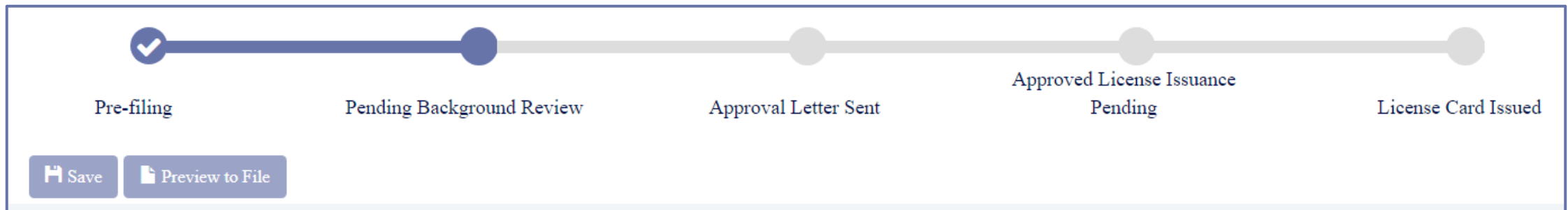
File

NEW LICENSE – APPLICATION FILED

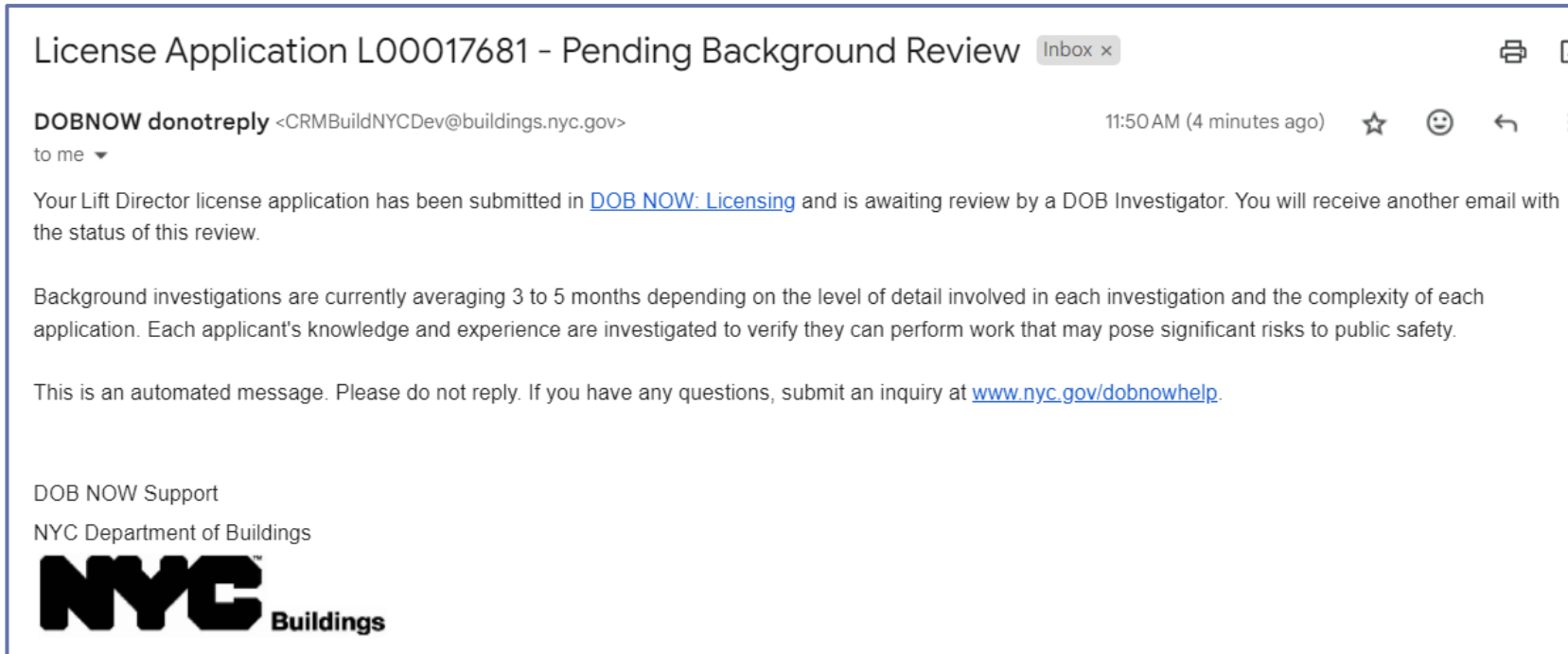


- Click **OK** on the Notification pop-up.

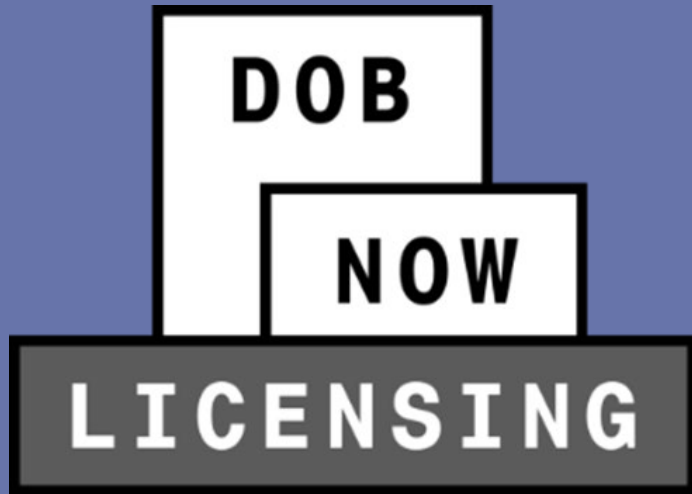
- The Status Bar will update to **Pending Background Review**.



NEW LICENSE – APPLICATION FILED



- You will receive an email that your license application has been submitted and is awaiting review.




**RESPONDING TO OBJECTIONS OR
REQUESTING RECONSIDERATION**

- The Background Unit has three options for responses to License Applications:
 - **Approved:** The background investigation is complete, and the License Application can move forward for review by the Licensing Unit.
 - **Objections:** There is an issue with the License Application that must be addressed by the Applicant before the background investigation can be completed.
 - **Denied:** The License Application cannot be approved with the information given. The Applicant can request to Reconsider the denial.

- If there is an **Objection** raised on a License Application, the Applicant will receive a **notification email**.

Background Review of License Application L00013688 - Objections Inbox x

 **CRM Build NYC Dev** <CRMBuildNYCDev@buildings.nyc.gov> 12:40 PM (0 minutes ago)
to me ▾

During the review of your application for Hoisting Machine Operator , the unit raised the following objection(s):
4/2/2024 12:39 PMWrong document uploaded for W2

Log in to [DOB NOW: Licensing](#) to make the required changes in the Application and click Resubmit. Your application will not be reviewed again until it is resubmitted.


This is an automated message. Please do not reply. If you have any questions, submit an inquiry at www.nyc.gov/dobnowhelp.

DOB NOW Support
NYC Department of Buildings

- Log into DOB NOW: *Licensing*, and from the My Applications tab on your dashboard, open the application that is in Objections status. A new **Objections** tab will display the Objection(s). Click the drop-down arrow to see comments.




The screenshot displays the application details for L00013688. On the left is a navigation menu with the following items: General Information, Background Investigation, Qualifications/Experience, Child Support Certification, Documents, **Objections** (highlighted with a red box), and Statements and Signature. The main content area is titled "Objections" and contains a table with the following data:

Objection	Action
 Further documentation required, Missing application documents.	Edit

- Add any additional **Comments** in the Comments box.
- Click **Update**.
- Add documents or otherwise update the License Application as needed.
- **Resubmit** updated License Application. The application will not be reviewed again until it is resubmitted.

Objections

Objection	Status	Action
^ Further documentation required, Missing application documents.	Open	

Comments*

255 characters remaining

Objection History
On 7/30/2024 9:53 AM by CRM System Account :

REQUESTING RECONSIDERATION

- If a License Application has been denied by the Background Unit, the Applicant has **60 days** to request that the Application be **Reconsidered**.
- Reconsideration can only be requested **once**. If the reconsideration is denied, a new Application must be submitted.
- From the My Applications tab on the dashboard, choose **Reconsider** from the **Select Action** drop-down on a **Denied** License Application.

Acti.∞	Filing Action	Application Number	Application Type	License Type	License Class/Class Type	Application Status
	Select Action: ▾	L00016825	New License	Hoisting Machine Operator	Limited License Boom Trucks	Denied
	Select Action: Reconsider					

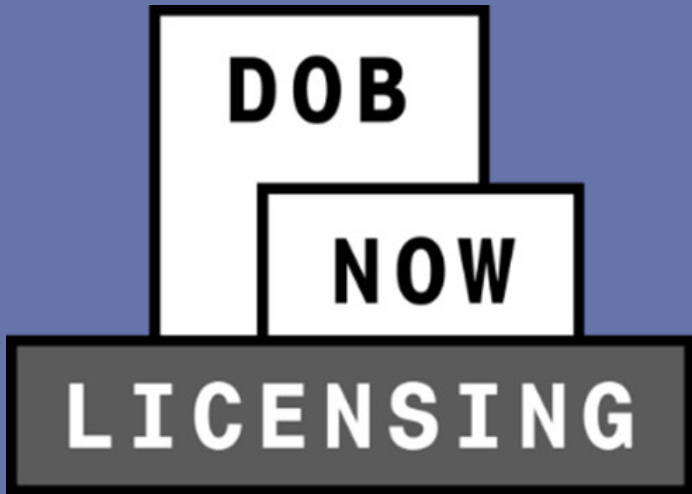
REQUESTING RECONSIDERATION

DOB
NOW

- Select **Save** on the Reconsider application. Then on the Documents tab, **upload a Reconsideration Statement/Affidavit** explaining the Reconsideration request.
- There is **no fee** for submitting a Reconsideration request. The request is not submitted until **Preview to File** is selected.

The screenshot shows the application interface for requesting reconsideration. At the top, there are buttons for 'Save' (highlighted with a red box) and 'Preview to File'. A notification banner reads: 'Reconsider in Progress, Select Preview to File to submit the License Application.' The left sidebar shows navigation options: 'L00016312', 'General Information', 'Background Investigation', 'Qualifications/Experience', 'Child Support Certification', 'Documents' (selected), and 'Statements and Signature'. The main content area is titled 'Documents' and contains a '+ Add Document' button and a table of required documents.

Actions	Document Type	
	40-hour Site Safety Course certificate	Required
	CHST designation card or Certified Safety Professional (CSP)and ...	Required
	Current NYS PE or RA Card / Certificate	Required
	EVF for Site Safety Coordinator	Required
	Most recent pay stub or latest W-2 Statement	Required
	Original proof of certification as a NYS Licensed	Required
	Photo ID (DL, Learner's Permit, StateID, GC or PP)	Required
	Physical Examination - (LIC62)	Required
	Reconsideration statement/Affidavit	Required



GETTING THE LICENSE

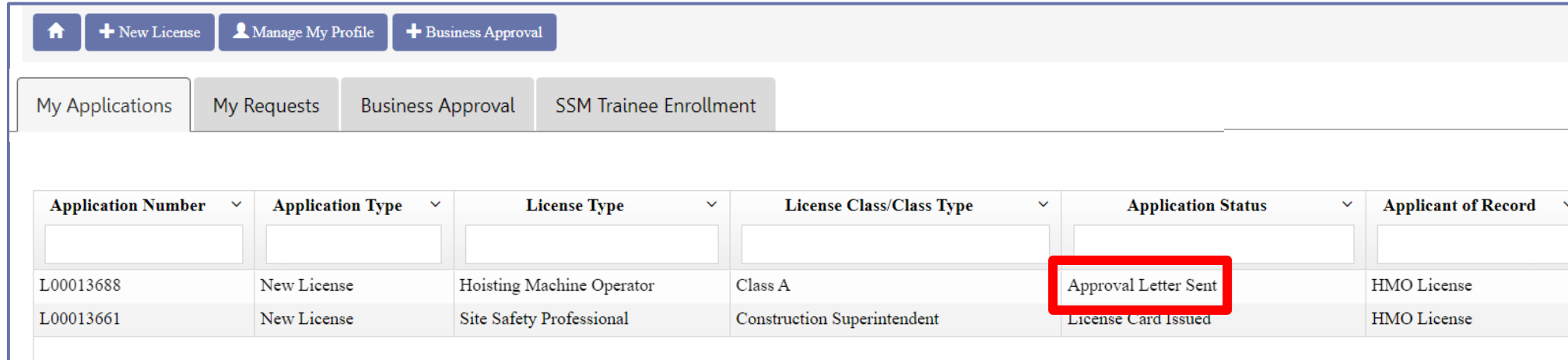
- Once the License Application is **Approved**, the Applicant will receive an email notification to schedule an appointment.

Your application for a NYC DOB Hoisting Machine Operator license has been Approved. To obtain your license, you are required to schedule an appointment. Log in to [DOB NOW: Licensing](#), open the license application and click on the **Appointments** tab.

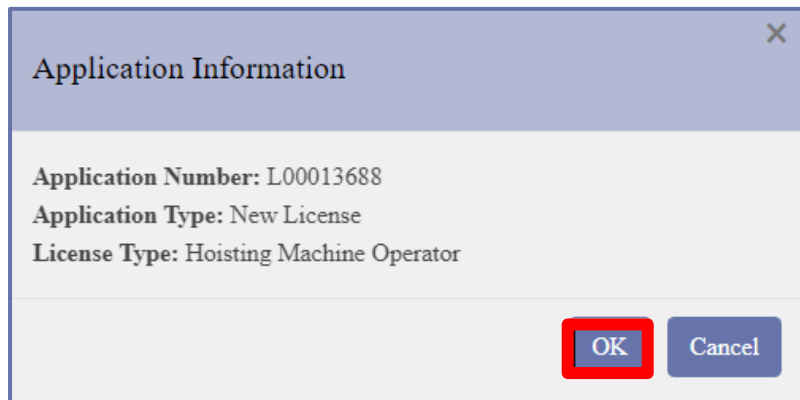
This is an automated message. Please do not reply. If you have any questions, submit an inquiry at www.nyc.gov/dobnowhelp.

DOB NOW Support
NYC Department of Buildings





Application Number	Application Type	License Type	License Class/Class Type	Application Status	Applicant of Record
L00013688	New License	Hoisting Machine Operator	Class A	Approval Letter Sent	HMO License
L00013661	New License	Site Safety Professional	Construction Superintendent	License Card Issued	HMO License



Application Information

Application Number: L00013688
Application Type: New License
License Type: Hoisting Machine Operator

OK Cancel

- Log into DOB NOW: *Licensing* and on the My Application tab, the Application Status will be **Approval Letter Sent**.
- Double-click on the application to open it. Click **OK** on the popup.

- From the Statements and Signature tab, scroll down to sign the **Executive Order Attestation**. Then select **Save**.

Executive Order Attestation

Executive Order Memo 1
I understand that I am responsible for reading & understanding the NYC Building Code and all safety related provisions of applicable NYC Department of Buildings' rules and regulations, this includes all RCNY Chapter 3300 Safeguards during Construction or Demolition.

Name:
(Electronically Signed)

Date:

Executive Order Memo 2
I understand that offering a bribe or gratuity for any benefit(s) and/or action(s) to be taken by a DOB employee is a crime and that I may face criminal and/or disciplinary action for violation the provisions of the New York State penal Law.
I have received, read and understand the DOB Executive Order #5/09 and understand that I may face disciplinary action for inducing a DOB employee to violate the provision of the Executive Order (see Executive Order #5/09)

Name:
(Electronically Signed)

Date:

- Schedule an appointment by clicking on the **Appointments** tab and then clicking the **+Schedule Appointment** button.

L00008604

General Information

Background Investigation

Qualifications/Experience

Documents

Appointments

Statements and Signature

Appointments

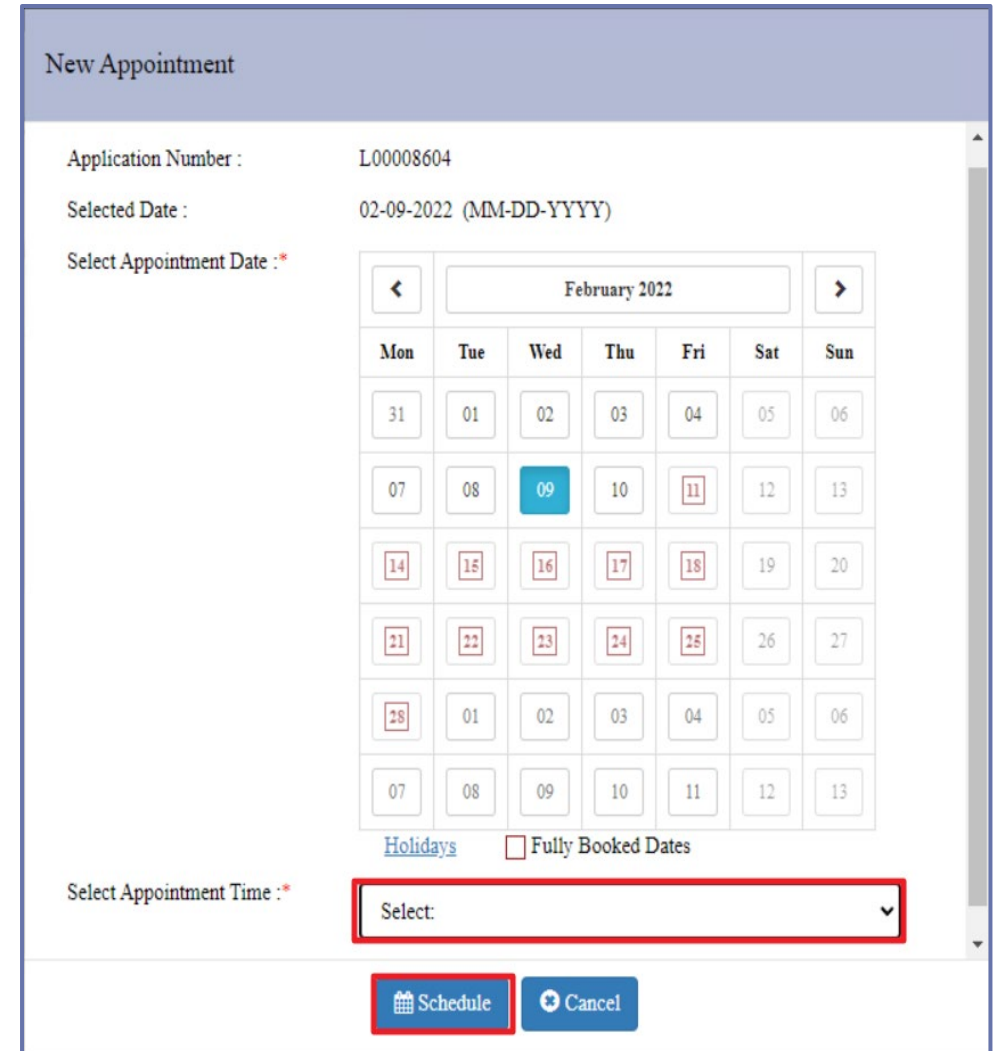
+ Schedule Appointment

Subject	Time	Status	Action
---------	------	--------	--------

GETTING THE LICENSE



DOB
NOW

- The **New Appointment** window will open.
- Select an **Appointment Date** from the calendar and then select an **Appointment Time** from the drop-down menu.
- Click **Schedule**.
- Click **Yes** to Confirm.

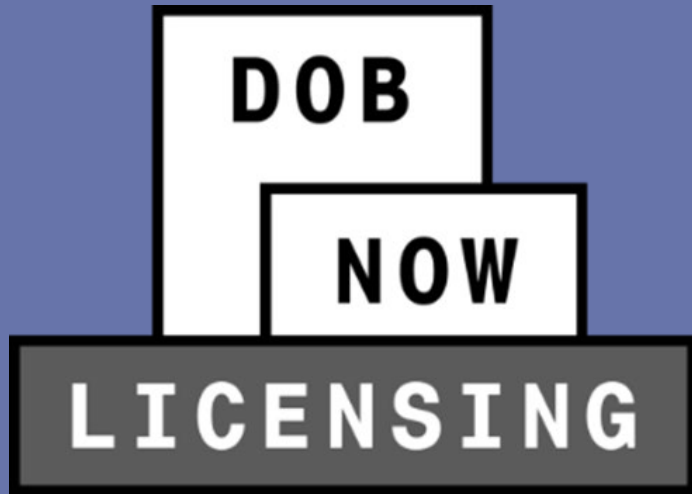


Appointments

+ Schedule Appointment

Subject	Time	Status	Action
 L00013661	4/24/2024 10:30:00 AM	Scheduled	 Cancel
Start Time 4/24/2024 10:30:00 AM	End Time 4/24/2024 11:00:00 AM	Duration 30 Minutes	

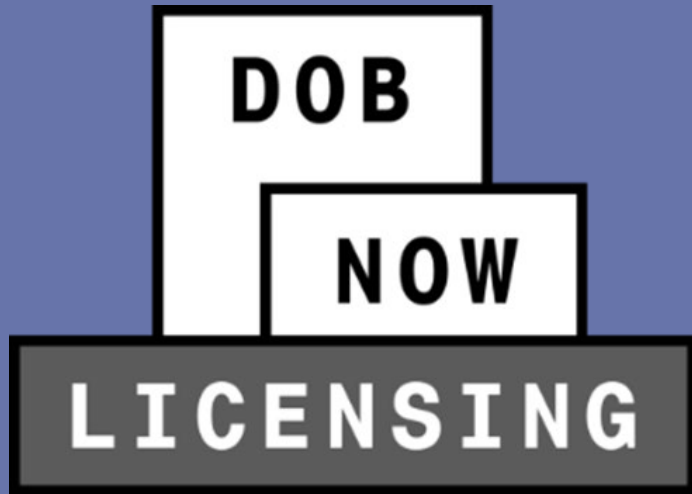
- The appointment details will be listed on the tab. If there is a need to cancel the appointment, it can be done from here.
- An email notification is sent confirming the appointment. The Licensing Unit is located at **280 Broadway, 1st Floor in Manhattan**. The applicant is required to attend the appointment; a representative cannot obtain the License Card.
- The License Card will be issued at the appointment scheduled with DOB. If a picture is necessary, it will be taken during that appointment.



MANAGE LICENSES

Renew, Reissue, Change Named Agent, Update Business Information

- **Renew License** - Licenses that expire after the set term (1, 3, or 5 years) will need to submit a renewal application 90 days before expiration or up to 1 year after expiration date.
- **Reissue License** - A License Card can be reissued if the card was stolen, lost, or never received in the mail.
- **Change Named Agent** - Update or remove the individual the Licensee assigned to accept service of Notices of Violation (NOV)/Summonses issued by DOB.
- **Update Business Information** – Add, change or remove the Licensee’s business information.



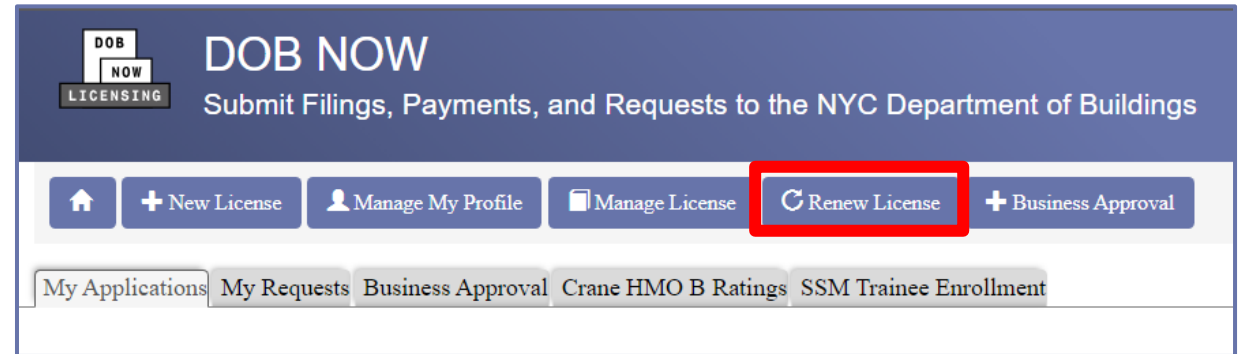
MANAGE LICENSES

Renew License

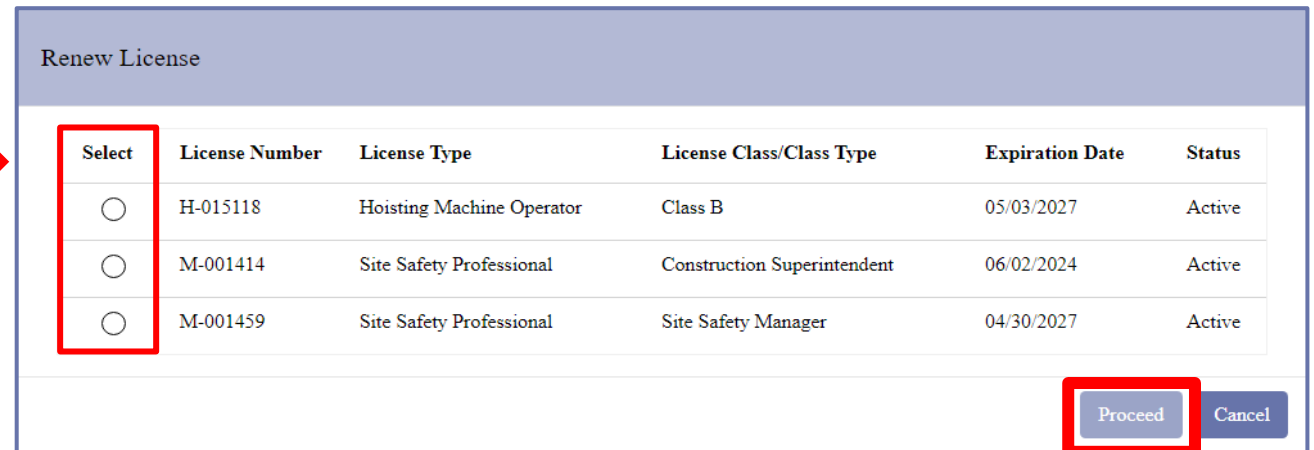
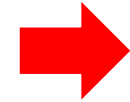
RENEW LICENSE – CREATE APPLICATION

DOB
NOW

- To create a renewal application, select the **Renew License** button. A pop-up window will appear with a list of associated licenses.
- Click the radio button to select the license you want to renew, and press **Proceed**.



The image shows the top navigation bar of the DOB NOW LICENSING portal. The header includes the DOB NOW LICENSING logo and the text "DOB NOW Submit Filings, Payments, and Requests to the NYC Department of Buildings". Below the header is a navigation menu with several buttons: Home, New License, Manage My Profile, Manage License, Renew License (highlighted with a red box), and Business Approval. Below the navigation menu are several tabs: My Applications, My Requests, Business Approval, Crane HMO B Ratings, and SSM Trainee Enrollment.



The image shows a pop-up window titled "Renew License". It contains a table with the following columns: Select, License Number, License Type, License Class/Class Type, Expiration Date, and Status. The "Select" column contains three radio buttons, each in a red box. A red arrow points from the text in the previous block to the first radio button. At the bottom right of the pop-up window, there are two buttons: "Proceed" (highlighted with a red box) and "Cancel".

Select	License Number	License Type	License Class/Class Type	Expiration Date	Status
<input type="radio"/>	H-015118	Hoisting Machine Operator	Class B	05/03/2027	Active
<input type="radio"/>	M-001414	Site Safety Professional	Construction Superintendent	06/02/2024	Active
<input type="radio"/>	M-001459	Site Safety Professional	Site Safety Manager	04/30/2027	Active

RENEW LICENSE WITH CHANGE

DOB
NOW

- Select **Yes** to **Renewal with Change** if you are changing the **Business Information**.
- If you are not changing the business information, select **No**.
- Select **Next** to continue to the **Supplemental Investigation Questionnaire**.

The screenshot shows a form titled "Renewal". It contains the following elements:

- A header bar with the text "Renewal".
- A question "Renewal with Change?*" with two radio button options: "Yes" (selected) and "No".
- A section titled "Renewal with:*" containing a checked checkbox for "Change Business Information".
- At the bottom right, there are two buttons: "Next" (highlighted with a red border) and "Cancel".

RENEW LICENSE – SUPPLEMENTAL INVESTIGATION QUESTIONNAIRE

DOB
NOW

Supplemental Investigation Questionnaire

Are you at least eighteen (18) years old? * Yes No

Are you fit to perform the work authorized by the trade? * Yes No

Are you able to read and write the English language? * Yes No

Are you of good moral character? * Yes No

Do you hold the national certification(s) (e.g. NCCCO) required for this license per 1 RCNY 104-09(d)? * Yes No

Do you have at least three (3) years of experience, within the five (5) years prior to submitting this application, operating hoisting machines in New York City in the presence of and under the direct supervision of a licensed Class A or Class B Hoisting Machine Operator in accordance with the requirements of 1 RCNY 3319-01(a)(4)(I). At least (2) years of this experience was in the operation of either mobile cranes with a manufacturer's rated capacity in excess of 50 tons (45.36 t) or tower cranes. Further, I have completed the outrigger placement requirements of 1 RCNY 104-09(a)(5)? * Yes No

- Once **Next** is selected, the **Supplemental Investigation Questionnaire** appears, with the same questions as seen on the initial license application.
- All applicants must meet the listed qualifications to obtain a license.
- Answer all questions to **Submit** the questionnaire.

RENEW LICENSE – GENERAL INFORMATION

DOB
NOW

- The fields in the **General Information** tab will auto populate with the information from the prior license and cannot be changed in a renewal application.
- The **Application Type** will be identified as **Renewal** or **Renewal with Change**. If it is a Renewal with Change, select +Add Business Information and/or Partner or Officer Information.
- At the bottom of this tab, the Applicant needs to **Attest** to the **Named Agent Information**.
- Click **Save** to continue.

Save

General Information

Application Information

Application Type*

Renewal

License Number*

001414

Named Agent Information

Do you have a Named Agent?*

Yes No

I acknowledge that failure to designate an agent in New York City (NYC) or maintain a NYC address for receipt of service, constitutes a waiver of any challenges to service of process.

I have personally reviewed all information entered on this application. I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.*

Name

(Electronically Signed)

Date

08/15/2024

L00013674

General Information

Background Investigation

Qualifications/Experience

Child Support Certification

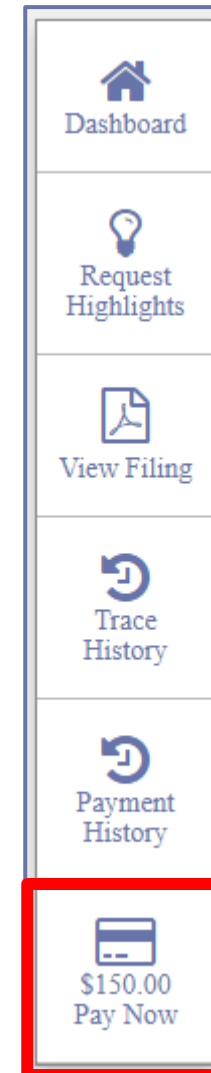
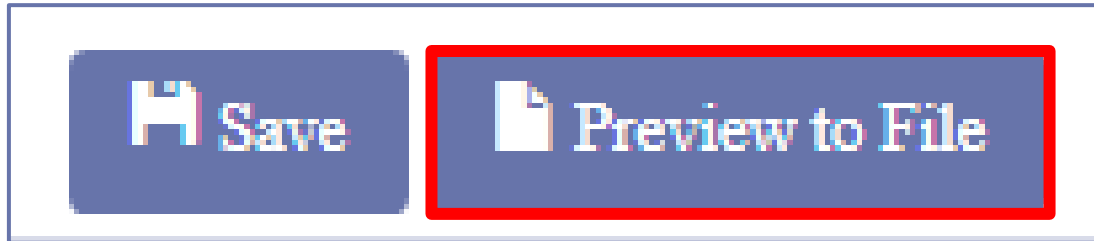
Documents

Statements and Signature

- An **Application Number** will be assigned, and new tabs will appear on the left panel:
 - **Background Investigation**
 - **Qualifications/Experience**
 - **Child Support Certification**
 - **Documents**
 - **Statements and Signature**
- The information from the initial license application will auto populate in these sections. Fill in all new or updated information, upload any required documents and complete the attestation on the Statements and Signature tab.

RENEW LICENSE – FEE & PAYMENT

- View the [DOB NOW: Licensing Fees](#) to see the License Renewal fee for each license type.
- Once the fee has been paid, click **Save** and then **Preview to File**.
- Review the Application and then **Submit**.

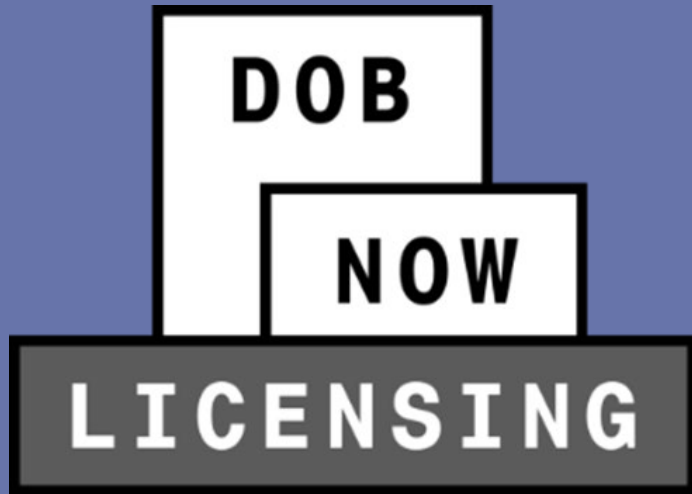


RENEW LICENSE – APPLICATION STATUS

A **Status Bar** appears at the top of the screen when the application is saved.

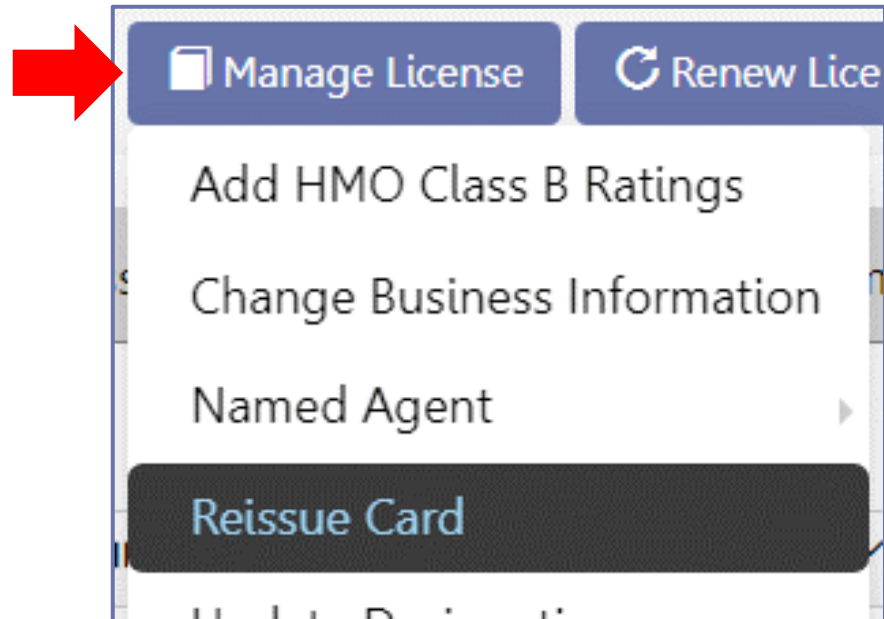


- The review process for a License Renewal is:
 - **Pre-Filing**
 - **Pending Background Review**
 - **Pending QA Review**
 - **Renewal Approved**
 - **Renewed License Card Issued**
- See the [Licensing Review Statuses](#) for a list and explanation of all Licensing application review statuses.
- Once the Licensing Unit has **Approved** the request, the applicant will receive an email notification and the new License Card in the mail within 10 business days.



MANAGE LICENSES

Reissue License



- To request a reissue of a license, hover over the **Manage License** button on the main dashboard and select **Reissue License**.
- The same pop-up seen for Renew License will appear to allow you to select which license will be reissued.
- A **Supplemental Investigation Questionnaire** will display next with the same questions seen in the initial license application. Answer all questions to **Submit** the questionnaire.

REISSUE LICENSE – REASON FOR REISSUE

DOB
NOW

- The General Information tab will appear with the information auto populated from the original license request.
- Under the Application Information section, select a **Reason for Reissue**. The options are:
 - **Stolen ID Card**
 - **Lost ID Card**
 - **Never received ID Card** (only appears if Applicant is requesting a second Reissue)

Application Information		
Application Type*	License Type*	License Class/Class Type*
Reissue	Hoisting Machine Operator	Class B
License Number*	Reason for Reissue*	
015444	Select	
Applicant of Record	Select	
First Name*	Stolen ID Card	Last Name*
	Lost ID Card	

REISSUE LICENSE – COMPLETE REQUEST

DOB
NOW

L00013674

General Information

Background Investigation

Qualifications/Experience

Child Support Certification

Documents

Statements and Signature

- Once the information on the General Information tab is saved, an **Application Number** will be generated.
- The process to complete the Reissue is the same as the steps in the Renewal process:
 - Fill in all new or updated information, upload any required documents and complete the attestation on the Statements and Signature tab.
 - There is a **\$50 fee** for Reissuing a license.
 - Once the request is filled out and the fee has been paid, the applicant clicks **Save** and then **Preview to File** to submit the application.

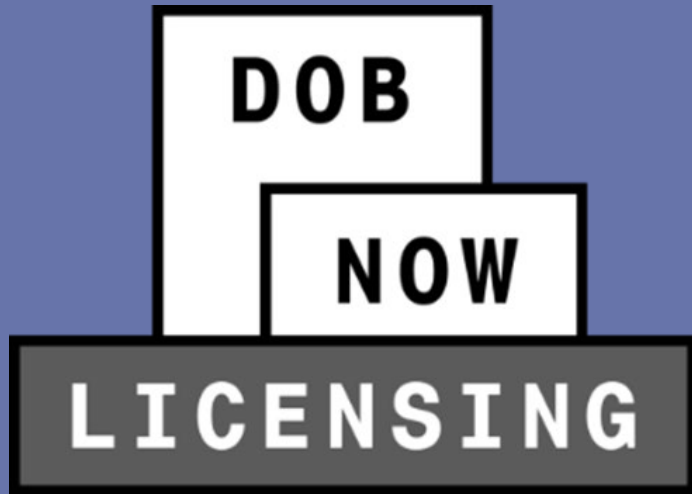


REISSUE LICENSE – NEW LICENSE CARD ISSUED



- The reissue application is then reviewed by the Licensing Unit. The Application Status is **Pending QA Review**.
- Once the Licensing Unit has **Approved** the request, the applicant will receive an email notification and the new License Card in the mail within 10 business days.
- Applicants will see a new License Application on the My Applications tab of **DOB NOW: Licensing**.

Application Number	Application Type	License Type	License Class/Class Type	Application Status	Applicant of
L00014314	Reissue	Hoisting Machine Operator	Class A	Pre-filing	HMO License
L00014019	New License	Site Safety Professional	Site Safety Manager	License Card Issued	HMO License

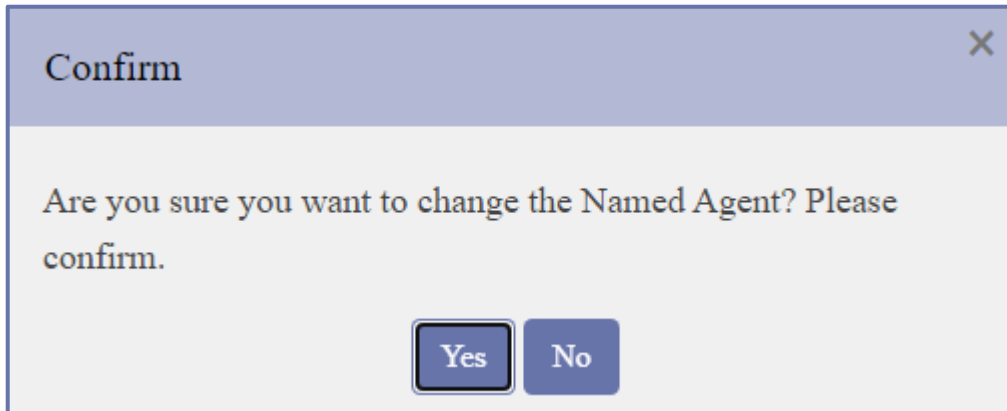
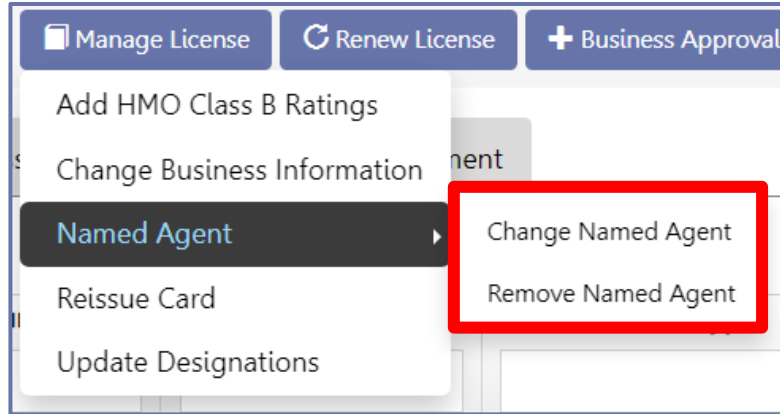


MANAGE LICENSES

Change Named Agent

CHANGE NAMED AGENT – CREATE REQUEST

DOB
NOW



- A **Named Agent** can be any individual residing or with a place of business in the five boroughs that the Licensee assigns to accept service of Notices of Violation (NOV)/Summonses issued by the DOB.
- To change a Named Agent, hover over the **Manage License** button and then hover over **Named Agent** and select either **Change Named Agent** or **Remove Named Agent**.
- Select the appropriate license and click **Proceed**.
- Click **Yes** on the Confirm pop-up.

CHANGE NAMED AGENT – NEW AGENT INFORMATION

DOB
NOW

- The existing Named Agent information and the Request Information will be displayed at the top of the page.
- Enter the new **Named Agent** information and click **Save**.



Named Agent Existing Name Not Available		Named Agent Existing Address Not Available	
Request Information			
Request Type* Change Named Agent	License Type* Hoisting Machine Operator	License Class/Class Type* Class B	
License Number* 015118	First Name* HMO	Last Name* License	
Email* HMOLICENSE01@GMAIL.COM			
Named Agent New Information			
First Name*	Middle Initial	Last Name*	
House Number*	Street Name*	Apartment/Building Number	
City*	Borough* Select	State* Select	
Zip Code*	Email* <i>Enter email/username...</i>		

CR00001189

General Information

Statements & Signature

Statements & Signature

As a condition of being granted a license/registration and/or qualification from the New York City Department of Buildings, I attest that I comply with all New York City Administrative Code and Department rules, regulations, and directives governing how licensees/ registrants/qualification holders conduct their specific trade.

I have reviewed the information provided in this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any statement made to the Department is a misdemeanor and that it is also unlawful 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/registration and/or qualification.

In the event of an accident that involves my actions undertaken in connection with my license/registration and/or qualification, 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.

I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.*

Name

Date

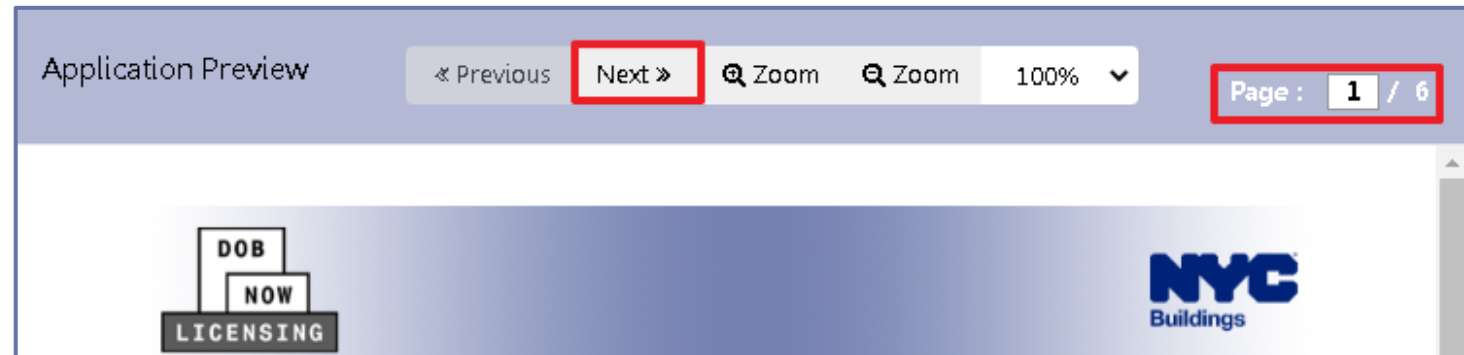
- Once the information on the General Information tab is saved, a **Request Number** will be generated.
- Click the checkbox to Attest on the **Statements & Signature** tab.

CHANGE NAMED AGENT – FILE THE REQUEST

Click **Preview to File** and **Next** to review all pages of the application.

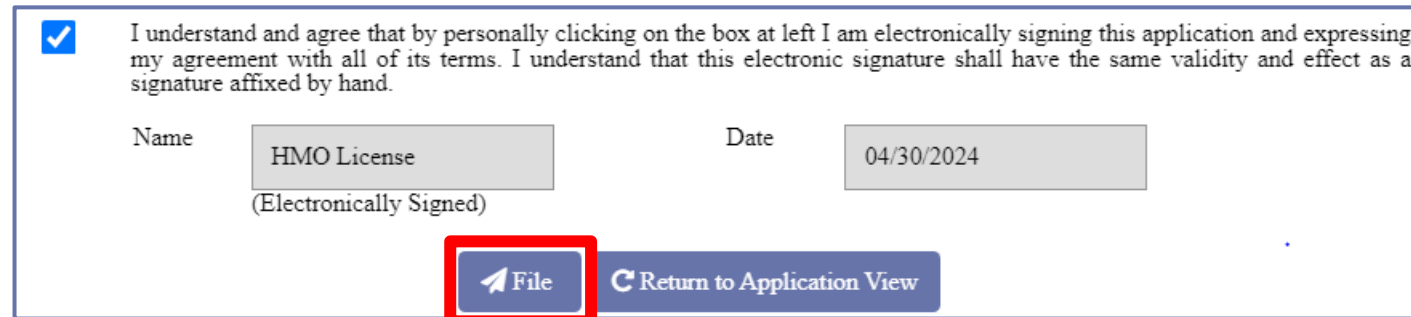


A screenshot of a web application menu. At the top, there are two buttons: 'Save' and 'Preview to File'. The 'Preview to File' button is highlighted with a red rectangular box. Below the buttons, the application ID 'CR00001189' is displayed. Underneath, there are two menu items: 'General Information' and 'Statements & Signature'.

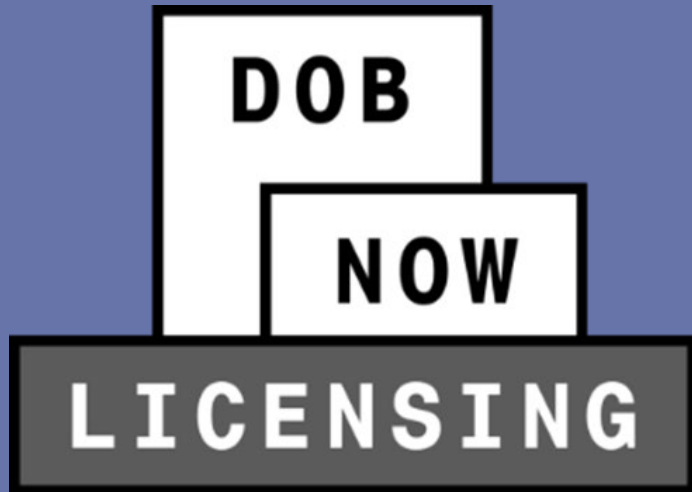


A screenshot of the 'Application Preview' screen. At the top, there are navigation controls: '« Previous', 'Next »', 'Zoom', 'Zoom', and '100%'. The 'Next »' button is highlighted with a red rectangular box. On the right side, there is a page indicator 'Page : 1 / 6', also highlighted with a red rectangular box. The main content area shows the 'DOB NOW LICENSING' logo and the 'NYC Buildings' logo.

- If acceptable, **click the checkbox** to attest at the bottom of the final page.
- Click **File** to submit the request.



A screenshot of the final page of the application. At the top, there is a checked checkbox followed by the text: 'I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.' Below this, there are two input fields: 'Name' with the value 'HMO License' and '(Electronically Signed)' below it, and 'Date' with the value '04/30/2024'. At the bottom, there are two buttons: 'File' and 'Return to Application View'. The 'File' button is highlighted with a red rectangular box.



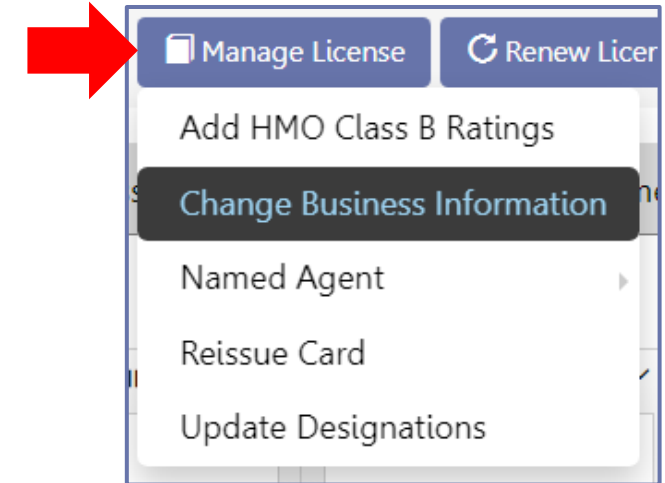
MANAGE LICENSES

Update Business Information

UPDATE BUSINESS INFORMATION

DOB
NOW

- To update Business Information, hover over the **Manage License** button and select **Change Business Information**.
- Options change depending on the License Type.
- Select the relevant License and click **Proceed**.



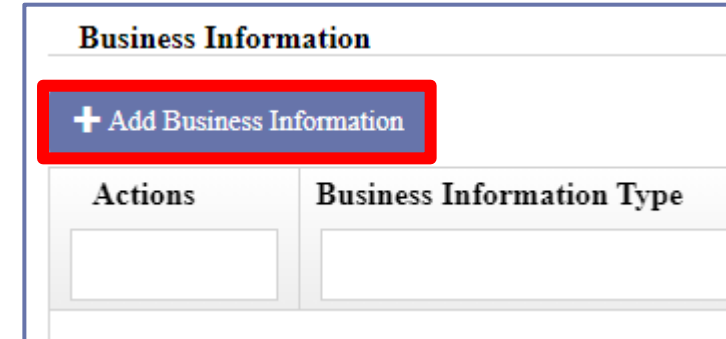
- The **Request Information** will display.
- Click **Save** to add the **Business Information**

A screenshot of a web application form titled 'Request Information'. The form is divided into two main sections: 'Request Information' and 'Business Information'. The 'Request Information' section contains three input fields: 'Request Type*' with the value 'Change Business Information', 'License Type*' with the value 'Site Safety Professional', and 'License Class/Class Type*' with the value 'Site Safety Manager'. Below these is a 'License Number*' field with the value '001459'. The 'Business Information' section is a table with five columns: 'Actions', 'Business Information Type', 'Business Name', 'Business Email', and 'Business Address'. The 'Save' button is highlighted with a red box in the top left corner of the form area.

BUSINESS INFORMATION – ADD BUSINESS

DOB
NOW

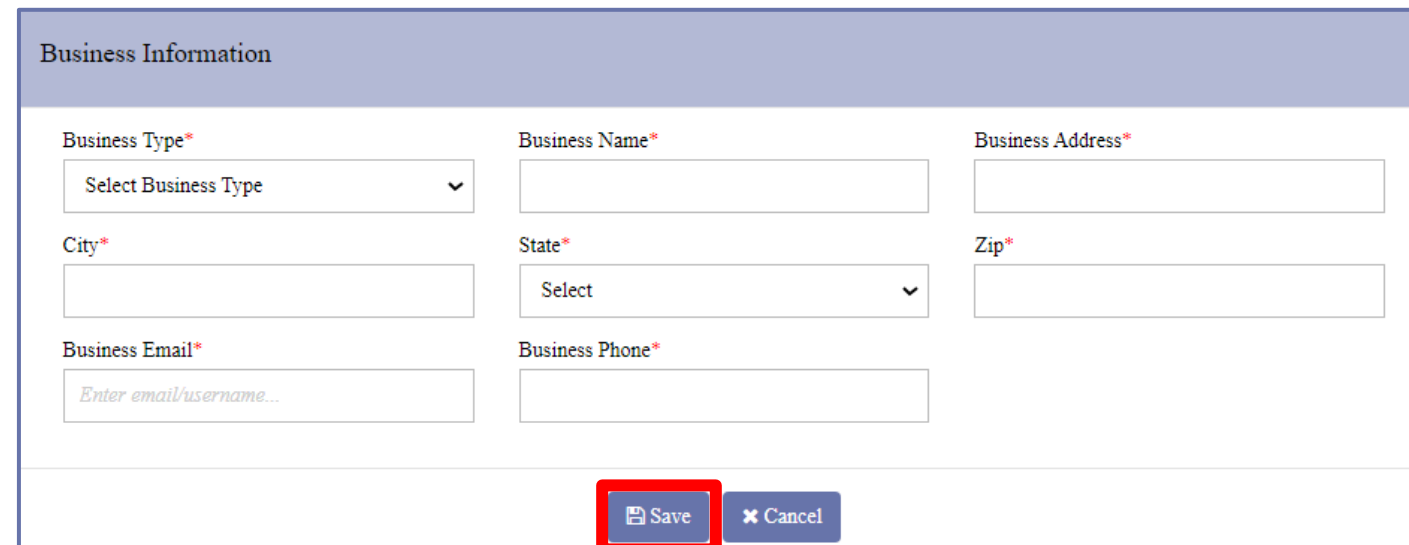
- Click the **+Add Business Information** button to add the Business:
 - **Type**
 - **Name**
 - **Address**
 - **Email**
 - **Phone Number**
- Select **Save** to continue



Business Information

+ Add Business Information

Actions	Business Information Type
<input type="text"/>	<input type="text"/>



Business Information

Business Type*

Business Name*

Business Address*

City*

State*

Zip*



Business Email*

Business Phone*

Save **Cancel**










BUSINESS INFORMATION – EDIT OR DELETE

DOB
NOW

Business Information					
	Business Name	Business Email	Business Address	Removed By User	Actions
	Site Safety Inc	trainingpera@gmail.com		No	 

- To update or delete Business Information, scroll to the right on the Business Information list and select the appropriate button under **Actions**.
- The **Edit** button will open the Business Information pop-up where the data can be edited.
- Clicking the **Delete** button will display a pop-up asking for confirmation.

- On the Documents Tab, upload:
 - **Notarized Letter**
 - **Proof of Name Change**
 - **Proof of Residence**

Actions	Document Type	Document Status	Comme
  	Notarized Letter	Required	
  	Proof of Name Change	Required	
  	Proof of Residence	Required	

Licensee - Statements & Signature

As a condition of being granted a license/registration and/or qualification from the New York City Department of Buildings, I attest that I comply with all New York City Administrative Code and Department rules, regulations, and directives governing how licensees/ registrants/qualification holders conduct their specific trade.

I have reviewed the information provided in this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any statement made to the Department is a misdemeanor and that it is also unlawful 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/registration and/or qualification.

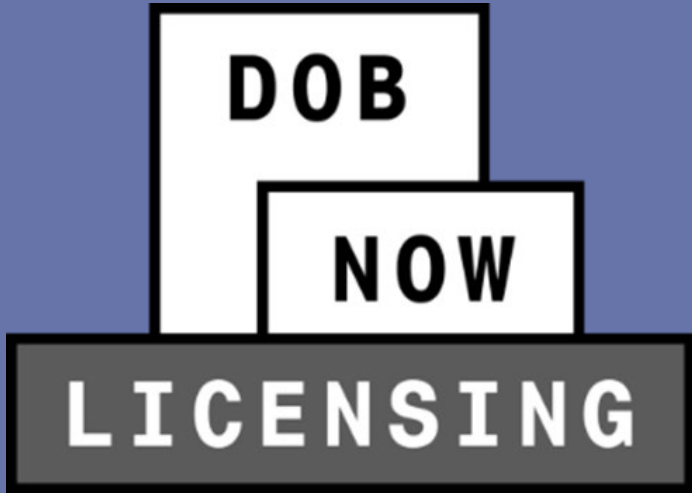
In the event of an accident that involves my actions undertaken in connection with my license/registration and/or qualification, I understand that the Administrative Code requires that I cooperate with any investigation and that failure to do so may result in immediate suspension, revocation or other disciplinary action.

understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.*

Name

Date

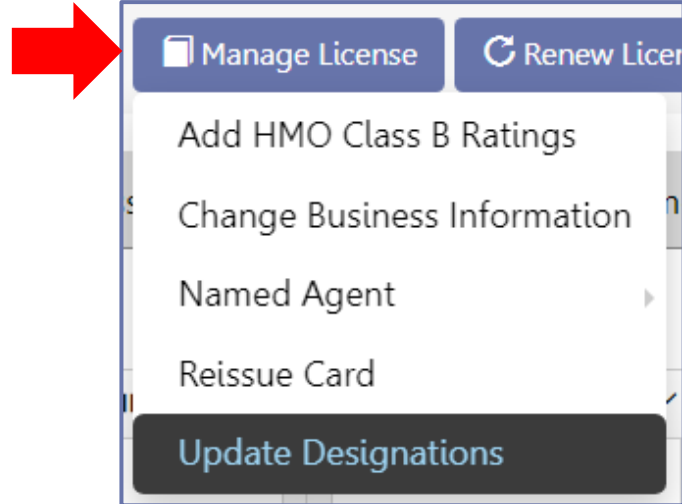
- The Applicant checks the box on the **Statements & Signature** tab to attest.
- **Save** the request and then click **Preview to File**.
- If acceptable, **check the box** to attest on the final page.
- Click **File** to submit the request.



UPDATE DESIGNATIONS

UPDATE DESIGNATIONS FOR HMO LICENSE

DOB
NOW



- Only **HMO Licensees** can update Designations.
- Hover over the **Manage License** button and select **Update Designations**.
- The Request Information will be auto populated.
- Click **Save** and then select the **+Add** button under Designation(s).

A screenshot of the 'Update Designations' form. The 'Save' button is highlighted with a red box. The form contains the following fields:

- Request Information**
- Request Type*: Update Designations
- License Type*: Class B
- License Number*: 015118
- Designation(s)***
- +Add (highlighted with a red box)
- Table headers: Actions, Designation Type, Designation, Designation Code, Certificate Number, Expiration Date

UPDATE DESIGNATIONS DETAILS

DOB
NOW

- Enter all **Designation Details** and click **Save**.
- Repeat for any additional Designations.
- On the **Documents** tab, upload the **NCCCO Certification Card** for each Designation.
- On the **Statements & Signature** tab, click the checkbox to Attest.
- Click **Preview to File** when complete.

Designation Details

Designation Type*

NCCCO

Designation*

Designation Code*

Certificate Number*







Expiration Date*

Save Cancel

UPDATE DESIGNATIONS DETAILS

Designation(s)*

+Add

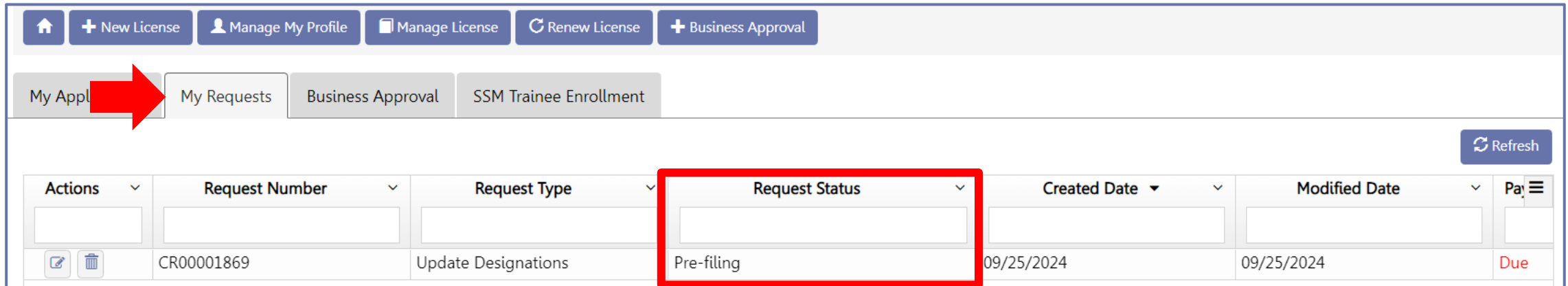
Actions	Designation Type	Designation Description	Designation Code	Certificate Number	
 	NCCCO	Articulating Boom Cranes	ABC	123456	04
 	NCCCO	Tower Cranes	TWR	123456	03
 	NCCCO	Lattice Boom Cranes	LAT	123456	12

- Existing Designations associated with your license may be updated by clicking the **Edit** button.
- Designations may also be removed by clicking the **Delete** button.



UPDATE DESIGNATIONS DETAILS

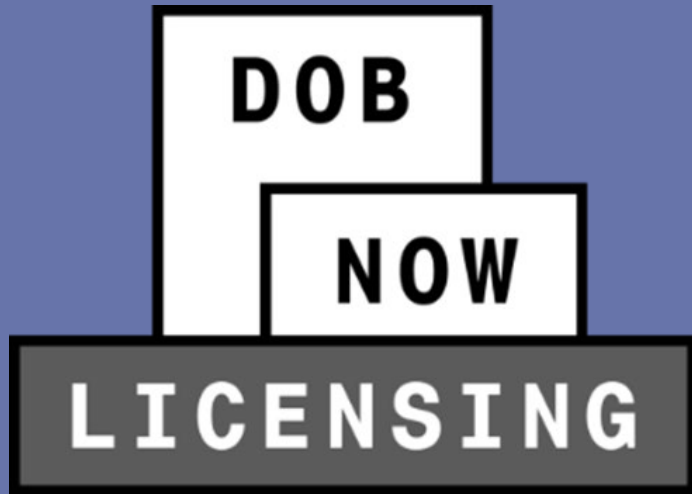
DOB
NOW

- The Request will go through **QA Review**.
- The status of the Request may be seen in the status bar or on the **My Requests tab** of the Licensing Dashboard.
- Applicants will also receive emails notifying them of status updates.



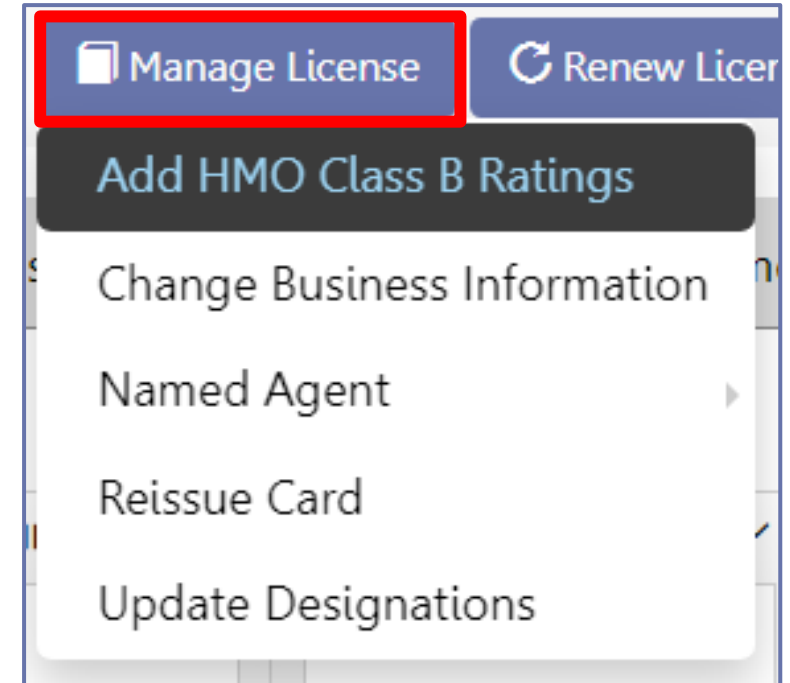
The screenshot displays the Licensing Dashboard interface. At the top, there are navigation buttons: Home, + New License, Manage My Profile, Manage License, Renew License, and + Business Approval. Below these are tabs for My Appl, My Requests, Business Approval, and SSM Trainee Enrollment. A red arrow points to the 'My Requests' tab. Below the tabs is a table with columns: Actions, Request Number, Request Type, Request Status, Created Date, Modified Date, and Pa. The 'Request Status' column is highlighted with a red box. The table contains one row of data:

Actions	Request Number	Request Type	Request Status	Created Date	Modified Date	Pa
 	CR00001869	Update Designations	Pre-filing	09/25/2024	09/25/2024	Due



ADD HMO CLASS B RATINGS

- Once an HMO B License has been granted, the operator may choose to add details about a **Add HMO Class B Ratings** that they have completed.
- This may be done as part of an HMO B License Renewal with Change or as a standalone transaction.
- For the standalone transaction, hover over the **Manage License** button on the main dashboard and select **Add HMO Class B Ratings** from the drop-down menu.



ADD HMO CLASS B RATINGS

DOB
NOW

The screenshot shows a web form with a 'Save' button in the top left corner. The form is titled 'General Information' and contains the following fields:

- Request Type***: A dropdown menu with 'Change' selected.
- Applicant of Record**: A section containing:
 - First Name***: HMO
 - Last Name***: License
 - Email***: HMOLICENSE01@GMAIL.COM
 - License #***: H - 015118
 - Phone**: (212) 555-5555
 - Class B License Application Number (LQA #)***: L012345678

- The **Request Type** and **Applicant of Record** information will be auto filled, including the License Number.
- Enter the **Class B License Application Number (LQA#)**.
- Click **Save**.

ADD HMO CLASS B RATINGS

DOB
NOW

Available Ratings (Multiple ratings may be added. Upload a separate Crane HMO B Rating Exam Attestation document for each rating).

[+ Add](#)

Actions	Crane HMO B Rating	Location	Date of Exam	The Exam was condu...	Manufact
---------	--------------------	----------	--------------	-----------------------	----------

Total Items: 0

1 / 1 10 Items Per Page

- Click **+Add** to enter a rating.

- In the pop-up window, select an **Available Rating** from the drop-down menu.

Crane HMO B Ratings

Available Ratings (Multiple ratings may be selected. A separate HMO B Rating attestation form upload must be provided for each rating sought):*

Select a value: ▼

- Select a value:
- Demag Crawler Cranes
- Demag Wheel Mounted Cranes
- FMC Corp Wheel Mounted Cranes
- Kobelco Crawler Cranes
- Liebherr Crawler Cranes
- Liebherr Wheel Mounted Cranes
- Link-belt Crawler Cranes
- Link-belt Wheel Mounted Cranes
- Manitowoc Crawler Cranes
- Manitowoc Wheel Mounted Cranes
- Tadano Wheel Mounted Cranes
- Terex Crawler Cranes
- Terex Wheel Mounted Cranes

in a simulator

Date of Exam*

No. of feet (Main Boom)*

ADD HMO CLASS B RATINGS

DOB
NOW

- Enter **Exam Details**.
- Click **Add**.

Exam Details

The exam was conducted (choose one)*

on a crane in a simulator

Location* Date of Exam* Manufacturer*

Make and Model #* No. of feet (Main Boom) No. of feet (Luffing Jub)

Add **Cancel**

ADD HMO CLASS B RATINGS

DOB
NOW

L000001112-BR

General Information




Documents

Statements and Signature

Required Documents

Documents*

+ Add Document

Actions	Document Type	Document Stat
  	Link-belt Wheel Mounted Cranes - Crane HMO B Rating Exam Results (Certific...	Required

- On the **Documents** tab, click the **upload button** to add the Exam Results.

ADD HMO CLASS B RATINGS

DOB
NOW

- Click **Choose File** and navigate to the document.
- Press **Upload**.

Upload a Document

Document Type*

Link-belt Wheel Mounted Cranes - Crane HMO B Rating Exam Results (Certificates and the Crane HMO B Exam Attestation form ▼

Document

Choose File No file chosen

Upload **Cancel**

Applicant Statement & Signature

Crane HMO B Rating Exam Attestation *

Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful 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. Violation is punishable by imprisonment or fine or both. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

I hereby attest that I have passed a practical exam for the rating indicated in this submission in accordance with 1 RCNY 104-09(h)(1)(ii).

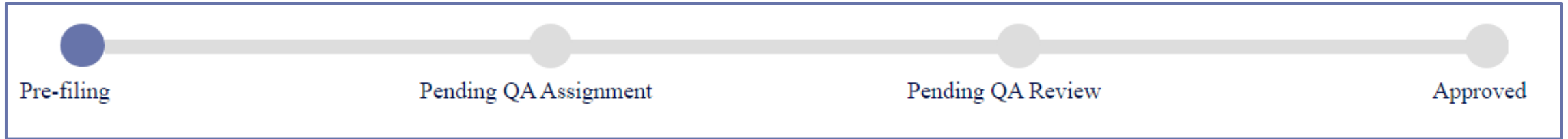
Name

Date

- On the **Statements and Signature** tab, **click the checkbox to Attest.**

ADD HMO CLASS B RATINGS



DOB
NOW



- Click **Submit** and then **OK** on the confirmation pop-up.
- The submission will be reviewed by the QA team. The steps of the process are:
 - **Pre-filing**
 - **Pending QA Assignment**
 - **Pending QA Review**
 - **Approved**

ADD HMO CLASS B RATINGS

- All B Ratings will be visible on the **My Requests** tab of the DOB NOW: *Licensing* dashboard.
- A new license card will be issued when the Rating is approved.

Actions	Request Number	Request Type	Request Status	Created Date	Modified Date	Pay
 	L000001196-BR	Change - HMO B Rating	Pre-filing	09/25/2024	09/25/2024	No Fee

DOB

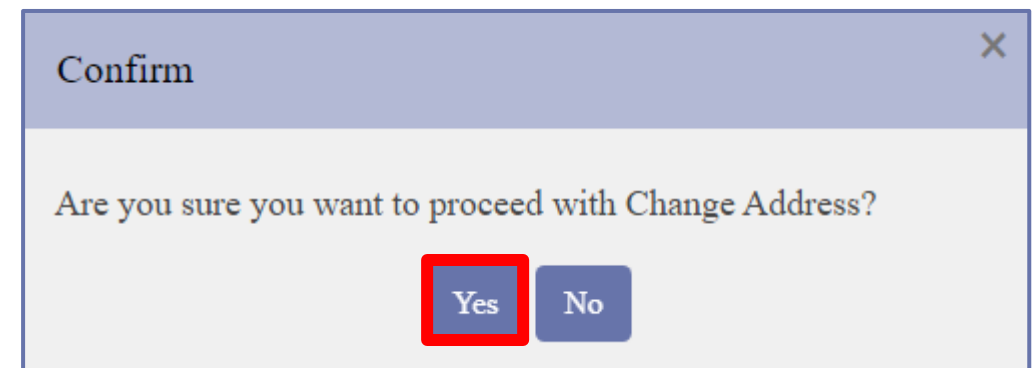
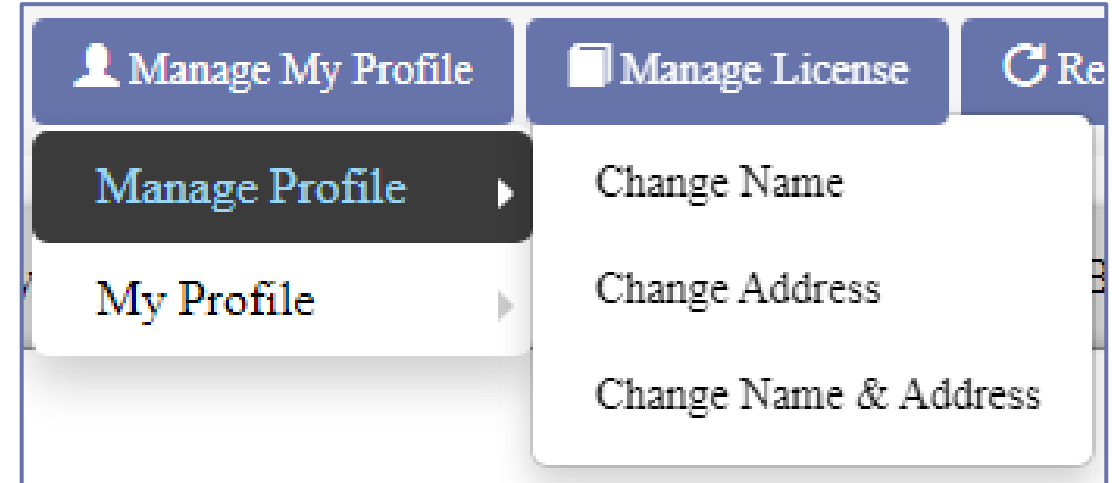
NOW

LICENSING

MANAGE PROFILE

Update License Holder Name or Address

- To update the Licensee's **name** and/or **address**, hover over the **Manage My Profile** button on the dashboard and select **Manage Profile**.
- From there, make a selection:
 - **Change Name**
 - **Change Address**
 - **Change Name & Address**
- A notification will appear to confirm the change. Click **Yes**.



UPDATE LICENSE HOLDER INFORMATION – NAME OR ADDRESS

DOB
NOW

- The Applicant will be brought into a new window where they will see the existing information as well as blank boxes to **enter new information**.
- Once all information has been updated, click **Save** to generate a **Request Number**.

Save Preview to File

CR00000241

General Information

Licensee Existing Name
Elevator License12

Licensee Existing Address
280 BROADWAY, GOTHAM CITY
MANHATTAN New York, 10007

Licensee New Name/Address

First Name* Middle Initial Last Name*

Email*
elevatorlicense12@gmail.com

House Number* Street Name* Apartment/Building Number*

City* Borough* State*







Zip Code* Home Telephone* Mobile Telephone*

UPDATE LICENSE HOLDER INFORMATION – REQUIRED DOCUMENTS

DOB
NOW

Documents*

+ Add Document

Actions	Document Type
  	Proof of Name Change (current photo ID: driver's license, learner's...
  	Proof of Residence (utility bill, bank statement, or lease/deed)

- In the **Documents Tab**, the Applicant must upload **Proof of Name Change** (current photo ID: driver's license, learner's permit, state ID, green card, or passport) and/or **Proof of Residence** (utility bill, bank statement, or lease/deed).

- The License holder then **attests** to the update request by clicking the checkbox.

Statements & Signature

As a condition of being granted a license/registration and/or qualification from the New York City Department of Buildings, I attest that I comply with all New York City Administrative Code and Department rules, regulations, and directives governing how licensees/ registrants/qualification holders conduct their specific trade.

I have reviewed the information provided in this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any statement made to the Department is a misdemeanor and that it is also unlawful 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/registration and/or qualification.

In the event of an accident that involves my actions undertaken in connection with my license/registration and/or qualification, 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.

I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.*

Name	Date
<input type="text"/>	<input type="text"/>

UPDATE LICENSE HOLDER INFORMATION – PAY FEE

DOB
NOW

Save Preview to File

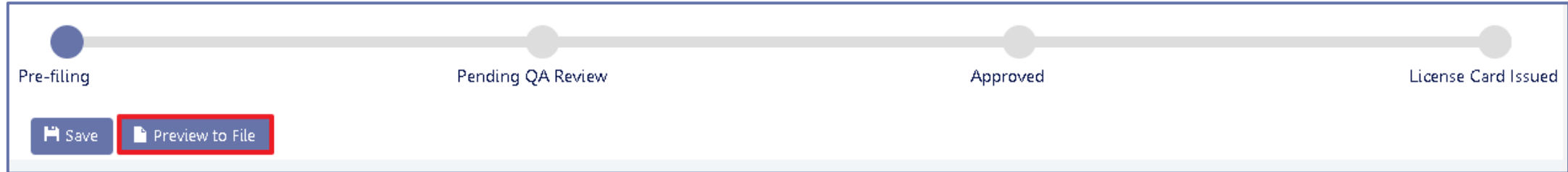
CR00000241

- **Save** the request.
- The request cannot be submitted until the fee of **\$50** is paid.
- Click on the **Pay Now** button on the bottom of the right menu bar to make the payment.

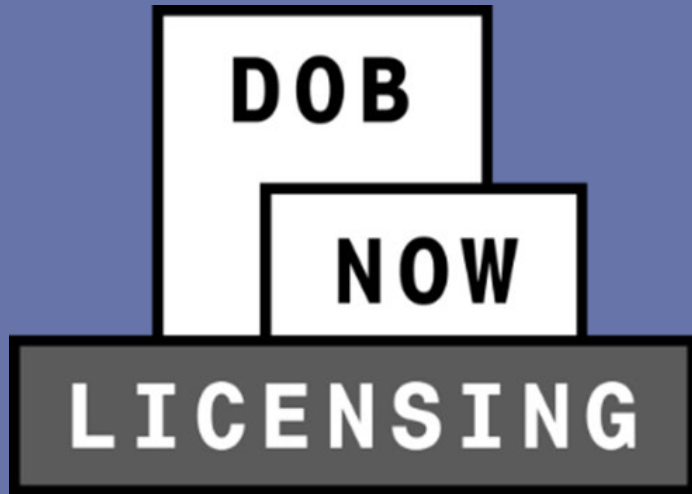
- Dashboard
- Request Highlights
- View Filing
- Trace History
- Payment History
- \$50.00 Pay Now**

UPDATE LICENSE HOLDER INFORMATION

DOB
NOW

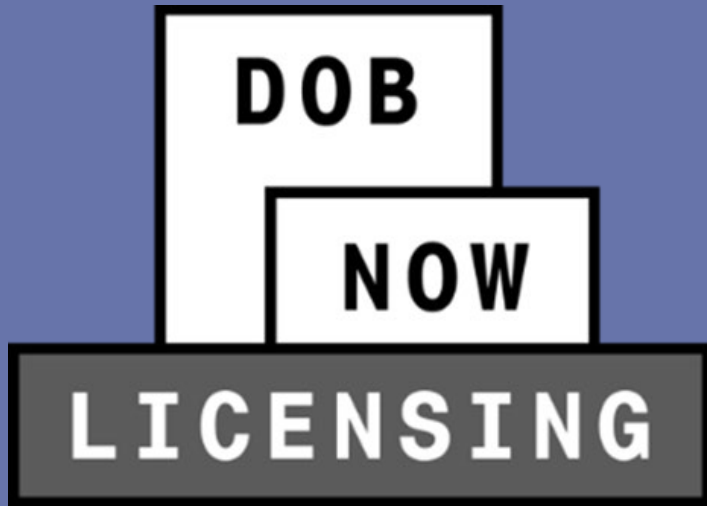


- Click **Preview to File** to submit the Request.
- If acceptable, **check the box** to attest on the final page.
- Click **File** to submit the request.
- Once the Licensing Unit has **Approved** the request, the applicant will receive an email notification and the new License Card in the mail within 10 business days.



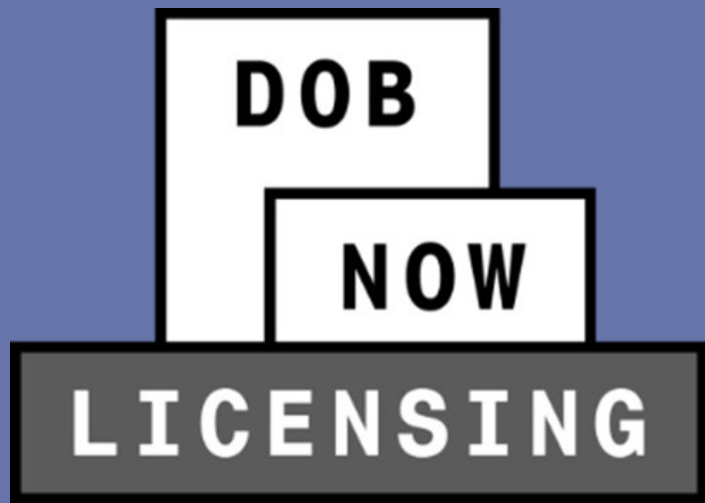
IMPORTANT NOTES

- Once your license application is approved in DOB NOW: *Licensing*, it is added to your **DOB NOW profile**. When the email address associated with a DOB NOW profile is entered in the stakeholder section of a DOB NOW filing, the name, business/address information, license type and license number from the profile will auto-populate.
- The eFiling/DOB NOW authentication process is no longer required to add your license information to your DOB NOW account. The authentication process is only for license types issued in DOB NOW: *BIS Options*, not DOB NOW: *Licensing*.
- Any changes to the information associated to a license issued in DOB NOW: *Licensing* is first requested and approved in DOB NOW: *Licensing* for it to be available for use in a DOB NOW filing.



THANK YOU!

NO PAPER. NO LINES.



NO PAPER. NO LINES.

QUESTIONS?