

## DOB NOW: *Licensing*

FALL 2024 RELEASE

SITE SAFETY PROFESSIONAL LICENSES

Industry Session

# BEST PRACTICES FOR THE VIRTUAL CLASSROOM

DOB  
NOW



Chat Feature



Mute Microphones



Ask Questions



Parking Lot



Feedback



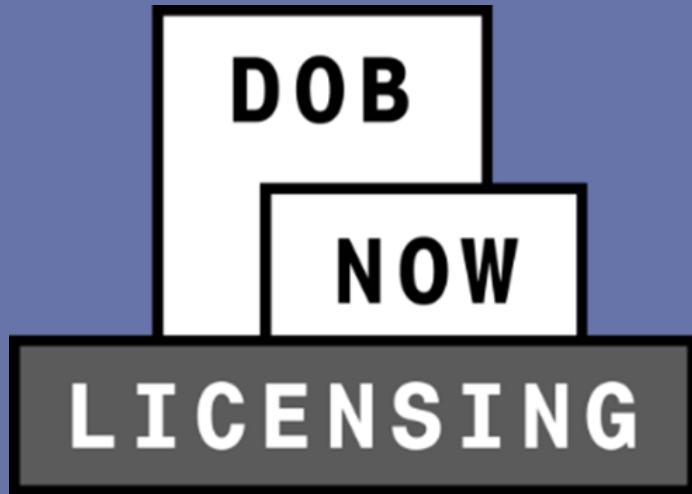
Participate

- Overview of Site Safety Professional Licenses
- Required Documents
- Statuses
- Licensing Fees
- License Process Flow
- Register and Pay for License Exam
- Public Portal Application Search
- 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
  - 18-Month Trainee Enrollment
- Update Name and/or Address
- Important Notes

# WHICH LICENSES ARE PART OF THIS RELEASE?



- The Site Safety Professional license classes covered in this training are:
  - **Site Safety Manager**
  - **Site Safety Coordinator**
  - **Construction Superintendent**



## OVERVIEW OF SITE SAFETY PROFESSIONAL LICENSES



- In New York City, all **Site Safety Professionals** (SSPs) are required to be **certified by the Department of Buildings** (DOB).
- Site Safety Licenses are issued by DOB **through DOB NOW**, its self-service online tool. See [nyc.gov/dobnowtips](https://nyc.gov/dobnowtips) for how to register for a DOB NOW account.
- As of October 16, 2024, **DOB NOW: *Licensing*** replaces **DOB NOW: *BIS Options*** for all SSP License-related transactions.

# SITE SAFETY PROFESSIONAL LICENSES – PROCESS UPDATE



- As of October 16, 2024, submit all Site Safety Professional (SSP) License-related transactions in **DOB NOW: Licensing**.

Submission Date	Where to Submit
Prior to October 16, 2024	DOB NOW: <i>BIS Options</i>
On or 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*.

# SITE SAFETY PROFESSIONAL LICENSES – PROCESS OVERVIEW

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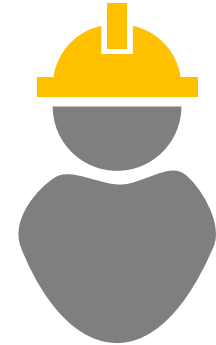
To become a **Site Safety Professional** in NYC, an applicant is required to:

- Meet the **license criteria** (age, language, experience, etc.)
- Complete a **40-hour Site Safety Course** (for CS), a **40-hour Site Safety Coordinator Course** (for SSC), or a **40-hour Site Safety Manager Course** and a **Site Safety Manager Examination** (for SSM)
- Have or obtain a **Site Safety Training (SST) Supervisor card**
- Begin the application in **DOB NOW: Licensing**
- Upload all **required documentation** including **Experience Verification forms**
- Pay any **required fees**
- **Submit** the license application

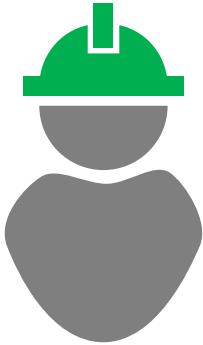


Applicants for **all SSP licenses** are required to meet these qualifications:

- 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**

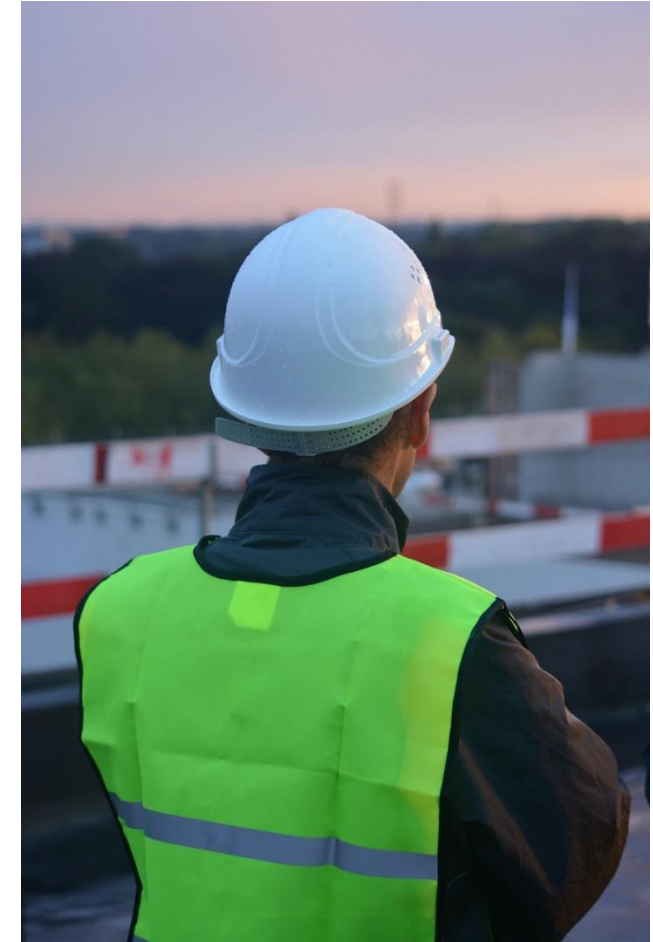


DOB Approved **Training** required for **each license type**:



- CS: 40-hour **Site Safety Training Course**
- SSC: 40-hour **Site Safety Coordinator Training Course** within **one year prior** to application
- SSM: 40-hour **Site Safety Manager Training** AND passed a department-sponsored **Site Safety Manager examination** within **one year prior** to application

- Site Safety Professionals require specific **experience levels** for each license class. The following slides list examples of acceptable areas of work. For more details about qualifying experience for each License Class (such as number of years, role, setting/location), see the [Licensing Unit's SSP web pages](#).
- **Experience Verification forms**, from all supervisors for years claimed as experience, are required to be uploaded as PDFs to **DOB NOW: Licensing**.



# SITE SAFETY MANAGER EXPERIENCE REQUIREMENTS

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**Site Safety Managers** must meet at least one of the following 9 requirements. See **Obtain a Site Safety Manager Certification** on the DOB web site for specifics (<https://www.nyc.gov/site/buildings/industry/site-safety-manager-certification.page>)

1. Is a **registered design professional**
2. Holds a **Certified Safety Professional** certification
3. Served as an **NYC-certified Site Safety Coordinator**
4. Is a **New York City registered Concrete Safety Manager**
5. Holds a **Construction Health and Safety Technician (CHST)** certification
6. Has experience in a **supervisory role with full-time responsibility over workers on construction subject to a Site Safety Plan**



# SITE SAFETY MANAGER EXPERIENCE REQUIREMENTS



**Site Safety Managers** must meet at least one of the following 9 requirements. See **Obtain a Site Safety Manager Certification** on the DOB web site for specifics (<https://www.nyc.gov/site/buildings/industry/site-safety-manager-certification.page>)

7. Served as an **NYC Department of Buildings enforcement official** including inspection of major buildings for compliance with Chapter 33 of the Building Code
8. Completed an **18-month on-the-job Safety Manager training program** under supervision of a certified Site Safety Manager
9. Completed a **Site Safety Manager apprenticeship program** approved by the NYS Department of Labor

# SITE SAFETY COORDINATOR EXPERIENCE REQUIREMENTS

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**Site Safety Coordinators** must meet at least one of the following 6 requirements. See **Obtain a Site Safety Coordinator Certification** [<https://www.nyc.gov/site/buildings/industry/site-safety-coordinator-certification.page>] on the DOB website for specifics:

1. Is a **registered design professional**
2. Holds a **Certified Safety Professional (CSP)** certification
3. Has experience as an **NYC registered Concrete Safety Manager**
4. Hold a **Construction Health and Safety Technician (CHST)** designation
5. Has experience **supervising workers full-time on construction subject to a Site Safety Plan**
6. Has experience as an **NYC Department of Buildings Code Enforcement Official including inspection** of major buildings for compliance with Chapter 33 of the Building Code



# CONSTRUCTION SUPERINTENDENT EXPERIENCE REQUIREMENTS

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**Construction Superintendents** must meet at least one of the following 8 requirements.

See **Obtain a Construction Superintendent Registration** on the DOB website

[<https://www.nyc.gov/site/buildings/industry/obtain-a-construction-superintendent-registration.page>] for specifics:

1. Has experience as a **full-time project supervisor** with on-site responsibility over construction or demolition **in New York City or the United States**
2. Holds a **NYS Professional Engineer** or **Registered Architect License Card** or certificate
3. Holds a **Certified Safety Professional (CSP)** designation or a **Construction Health and Safety Technician (CHST)** designation and has completed an **8-hour Site Safety** course
4. Holds a **Site Safety Manager** or **Site Safety Coordinator** certificate or **Concrete Safety Manager** registration and has completed an **8-hour Site Safety** course



# CONSTRUCTION SUPERINTENDENT EXPERIENCE REQUIREMENTS

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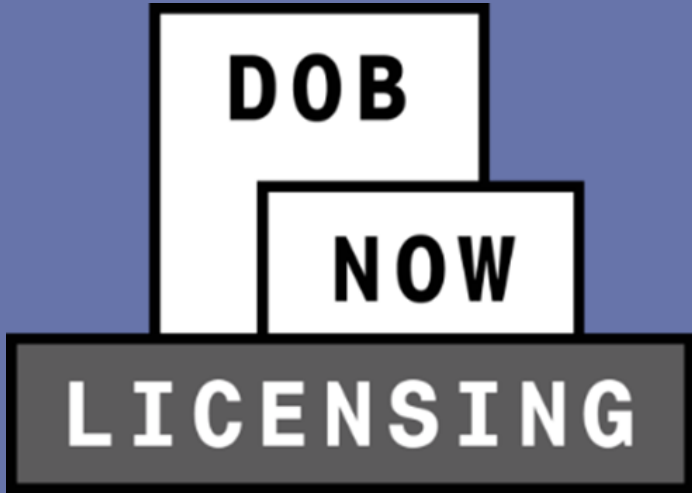
**Construction Superintendents** must meet at least one of the following 8 requirements. See **Obtain a Construction Superintendent Registration** on the DOB website

[<https://www.nyc.gov/site/buildings/industry/obtain-a-construction-superintendent-registration.page>] for specifics:

5. Has experience as a **Building Code Enforcement Official including performing inspections** and has completed an **8-hour Site Safety course**
6. Has experience as a **Safety Official for a governmental entity or construction firm** or as a **Safety Manager or Safety Engineer for a construction safety consulting firm**
7. Has experience **working with plans in a relevant construction trade** and has completed a **40-hour Site Safety course**

[Link](#)

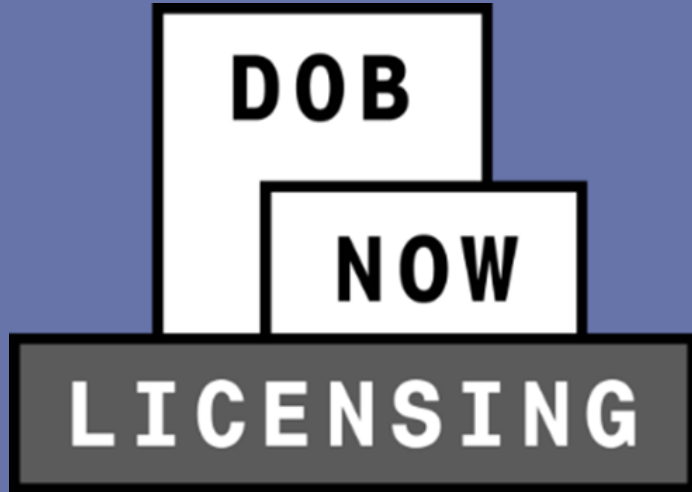




DOCUMENTS

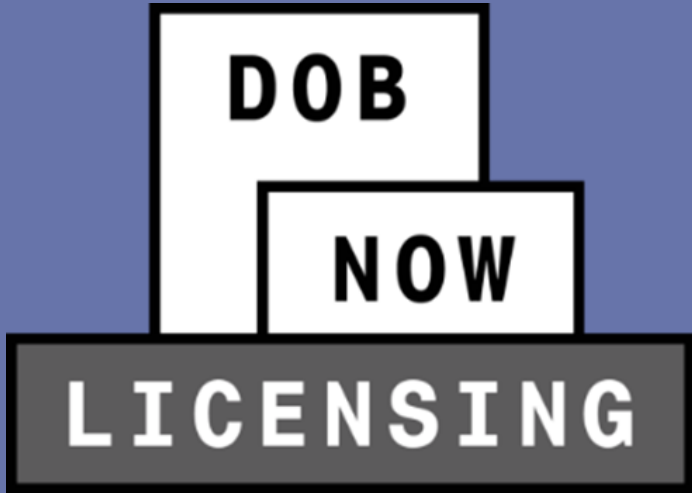
# LICENSES: REQUIRED DOCUMENTS

- 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](#).



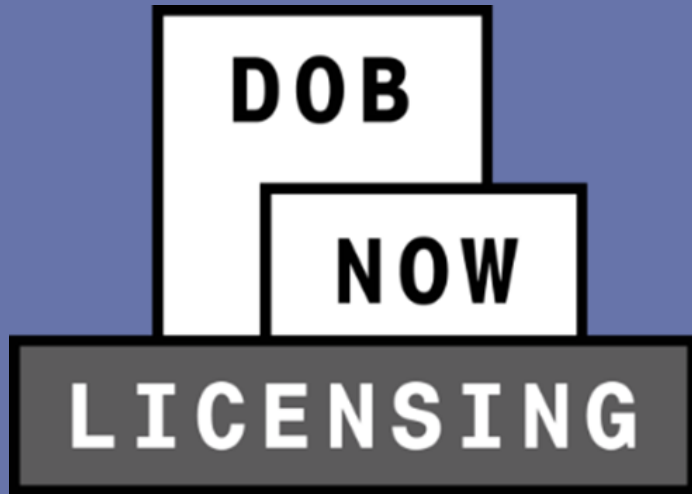
**STATUSES**

- 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**

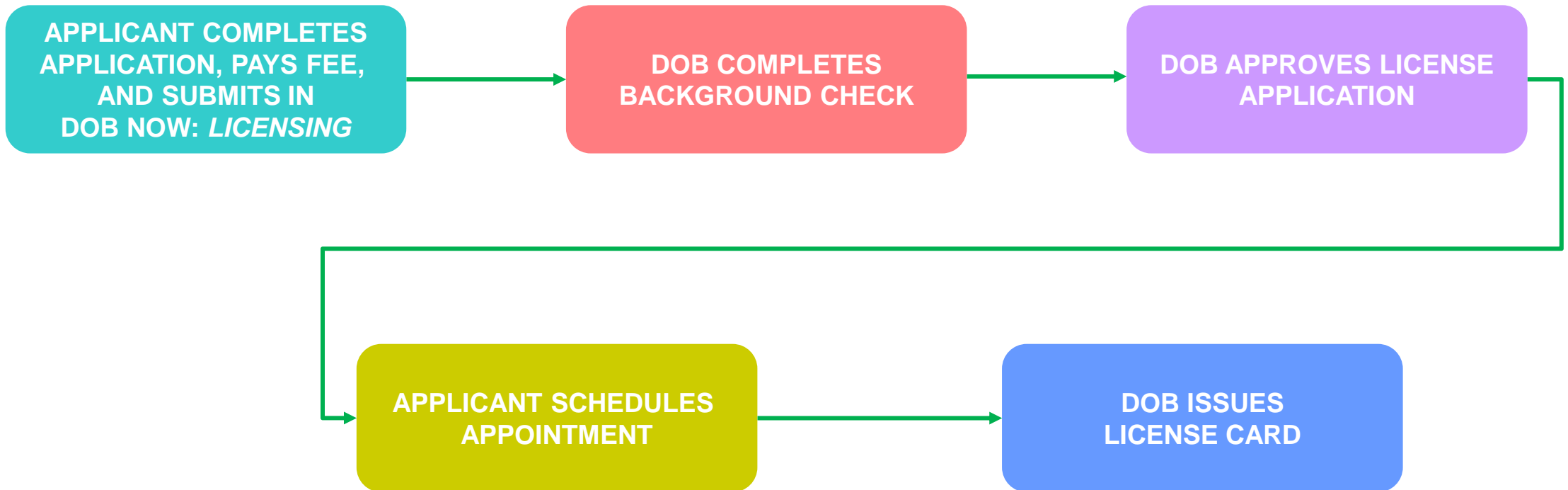
- All License Request fees can be found in the [Licensing Fees document](#).
- **Late Fees** for License Renewal apply if the Renewal Request is filed:
  - 30 days or fewer before the Expiration Date of the License
  - Up to one year after the Expiration Date of the License
- Links for all resources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



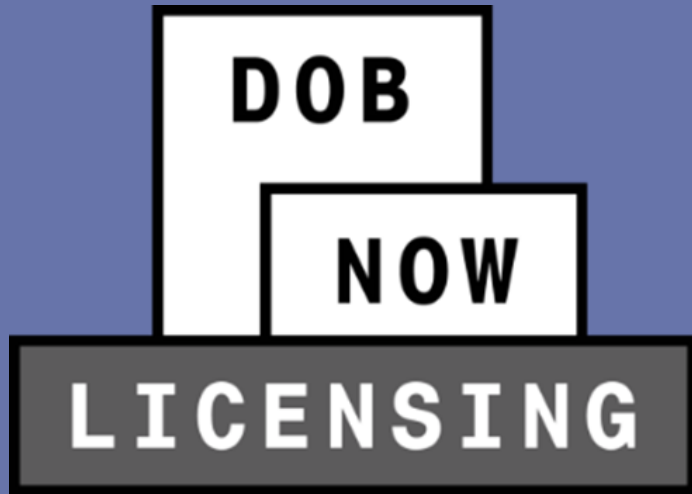
## STEPS TO GET A LICENSE

# STEPS TO GET A NEW LICENSE

- These are the steps for applying for any License.
- Site Safety Manager applicants are required to **register/pay for and pass an Exam** before the application is submitted.



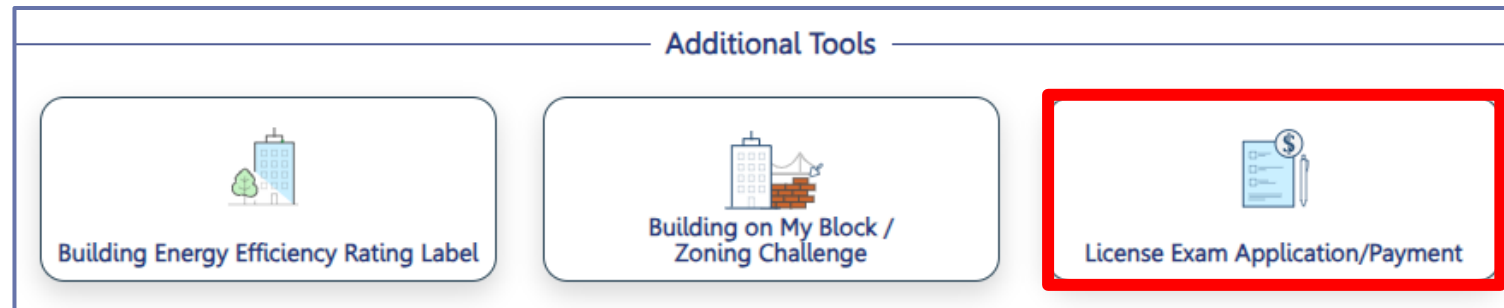




## HOW TO REGISTER AND PAY FOR A LICENSE EXAM

# HOW TO REGISTER AND PAY FOR AN EXAM

- This process applies only to: **Site Safety Managers** and **Elevator Agency Directors, Co-Directors and Inspectors**.
- To be eligible to take the exam, Applicants cannot have taken the exam in the last **14 days** or **three or more times in the past six months**.
- Exams are not given by the Department of Buildings. Once the exam is paid for, it will be scheduled through an approved **Exam Vendor**. Applicants then upload their score report as part of the DOB Application.



- Applicants **do not need to log in** to register and pay for an exam.
- On the DOB NOW home page at [nyc.gov/dobnow](https://nyc.gov/dobnow), select **License Exam Application/Payment**.

The screenshot shows a web interface titled "License Exam Application/Payment". Below the title, there is a text instruction: "To make an exam fee payment, select the below Payment options." Below this text are two blue buttons. The top button is labeled "New Payment" and the bottom button is labeled "Repayment of Exam Fee (Returned Check)".

- Applicants can either make a **New Payment** or **Repayment of Exam Fee (Returned Check)**.

# HOW TO REGISTER AND PAY FOR AN EXAM

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## Exam Fee Details

License Type

Site Safety

License Class/Class Type\*

Manager

Are you taking the exam for the first time?\*

Yes  No

Email\*

sitesafety@test.com

Last Name\*

Site

First Name\*

Safety

Middle Initial

Address\*

1 Test St

City\*

New York

State\*

New York

Zip\*

10007

Phone #\*

(212) 551-1212

Date of Birth\*

01/01/1985

Social Security Number\*

XXX-XX-9394

Create

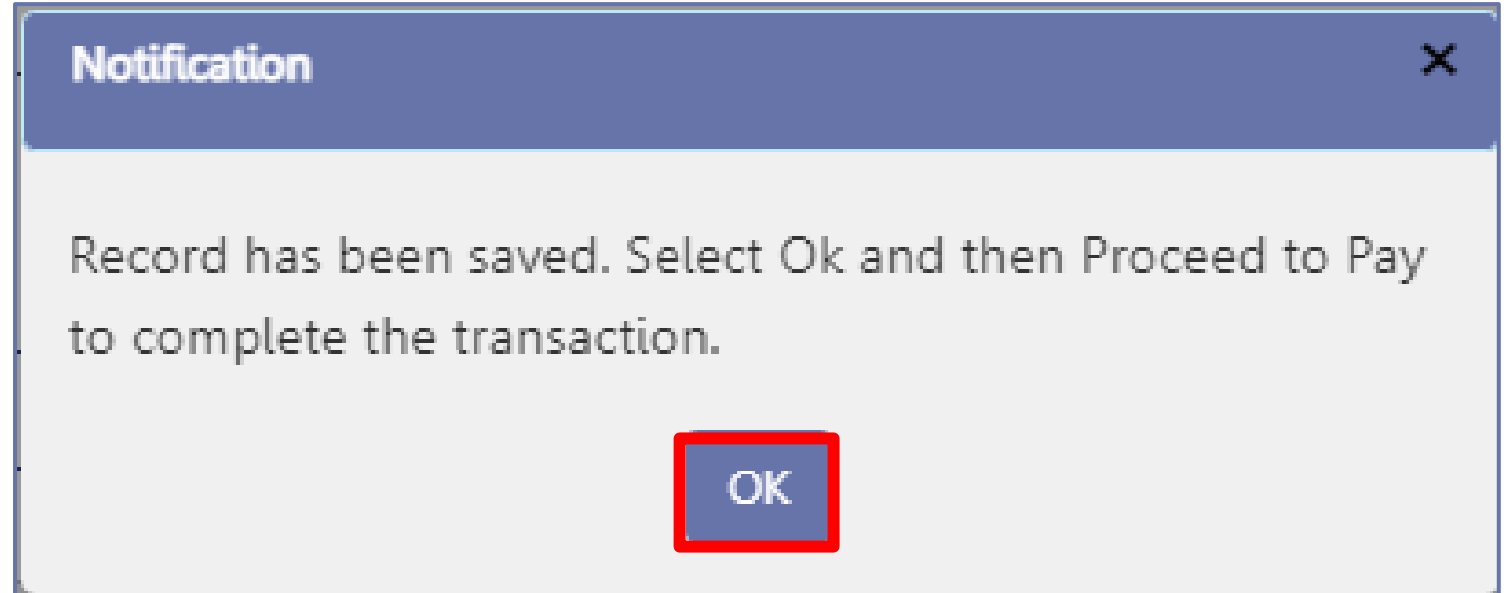
Cancel

- Choosing New Payment will open the **Exam Fee Details** pop-up.
- Once all fields are completed, select **Create**.

# HOW TO REGISTER AND PAY FOR AN EXAM

DOB  
NOW

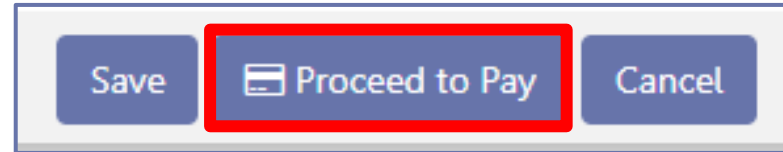
- A pop-up notification will state that the record was saved. Click **OK** to continue.



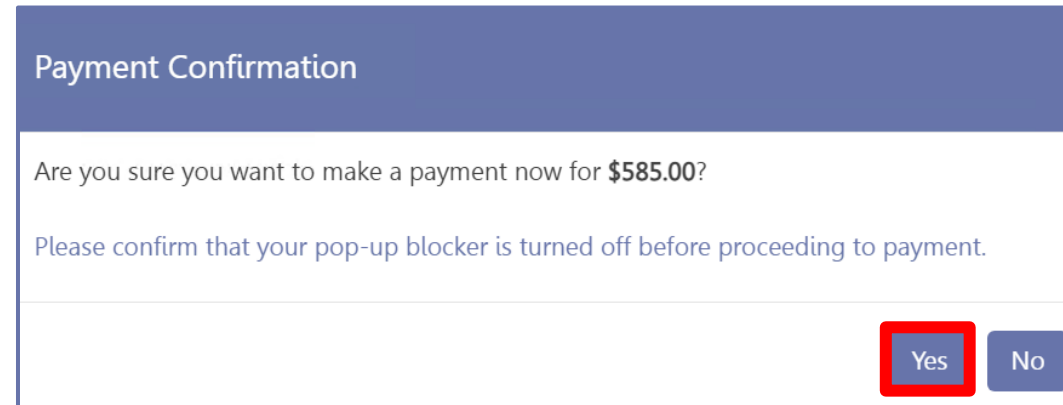
# HOW TO REGISTER AND PAY FOR AN EXAM

DOB  
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- A new **Proceed to Pay** button will appear.



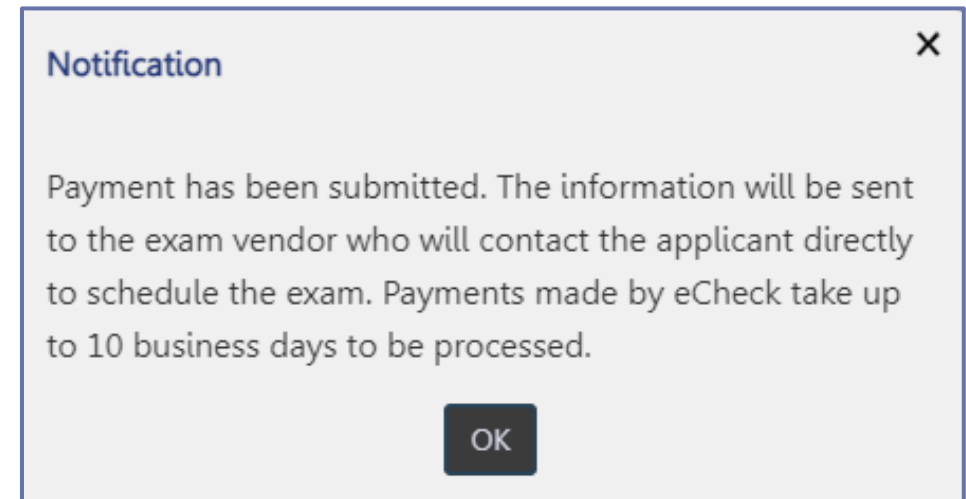
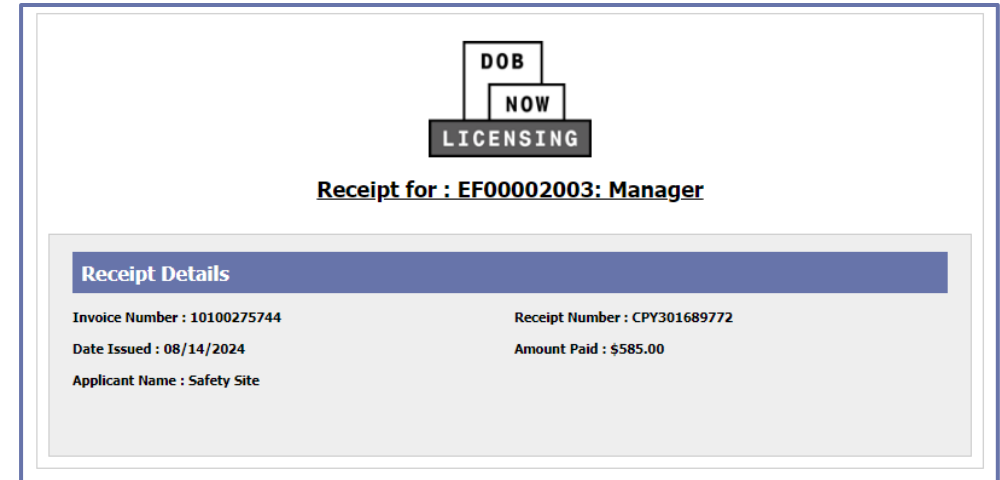
- A pop-up Payment Confirmation notification will ask you to confirm. Click **Yes** to continue.

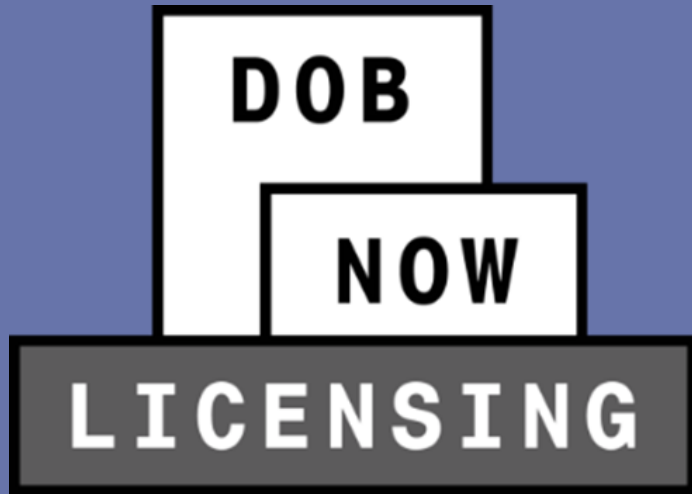


- You will be taken to the NYC CityPay site (after a confirmation) to pay the Exam Fee by eCheck, credit card or PayPal/Venmo. Payments made by eCheck can take up to 10 business days to process.

# HOW TO REGISTER AND PAY FOR AN EXAM

- CityPay will provide a receipt that payment has been made.
  
  
  
  
  
  
  
  
  
  
- A notification on the DOB NOW home page will also confirm payment. The information will be sent to the exam vendor who will contact the applicant directly to schedule the exam.













## 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	<b>Includes BIS Records</b>  Licensee	 Violation	 <b>Application Search</b>

Application Search

Search by \*

DOB NOW Permits by Applicant

DOB NOW Licensing Application Number

License Application Number \*

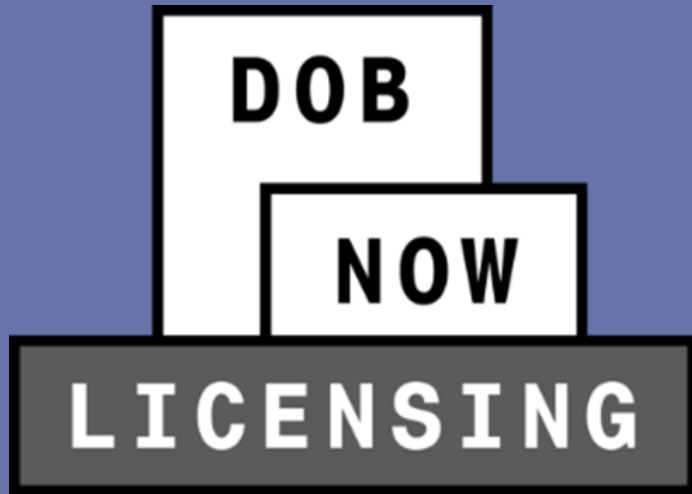
**License Application Status**

---

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

[Close](#)

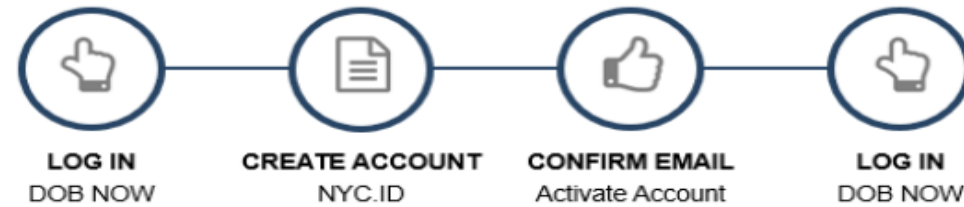
- Searching by a **License Application Number** will provide the details of the License Application.



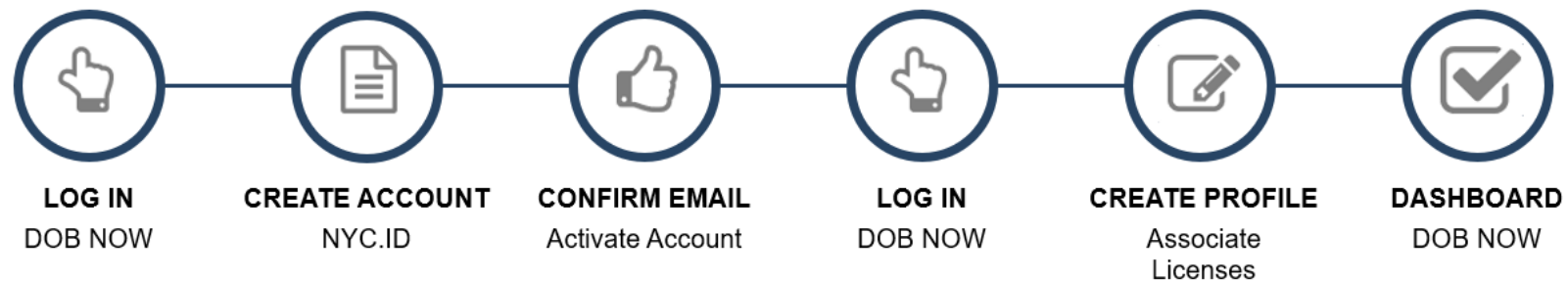
## HOW TO LOG INTO DOB NOW: LICENSING

# 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](https://nyc.gov/dobnowtips).



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

Enter your NYC.ID email address:

Email

Login

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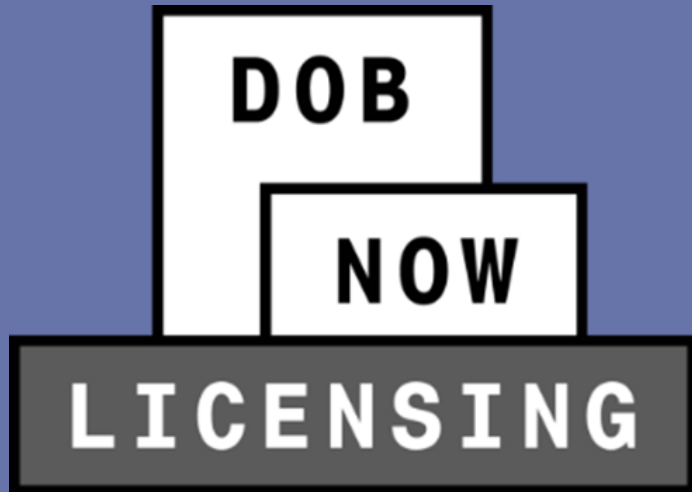
If you need an NYC.ID

Create Account

New login process as of June 3, 2024. Visit [www.nyc.gov/dobnowtips](https://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.

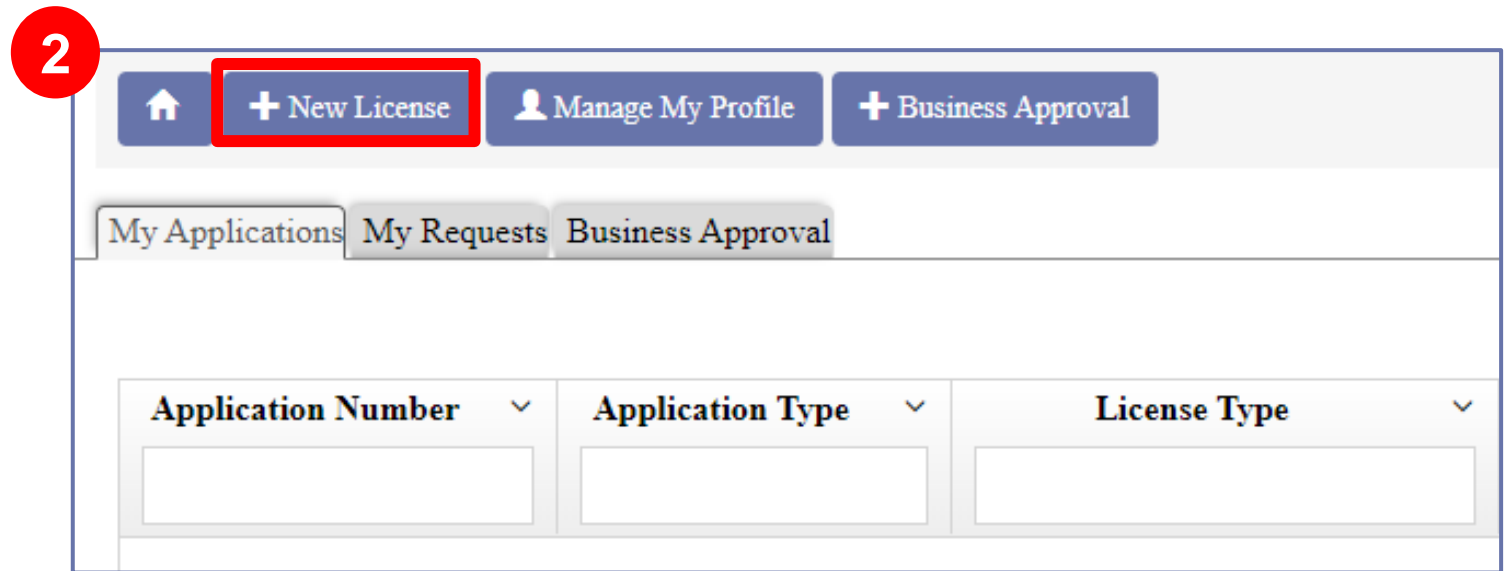
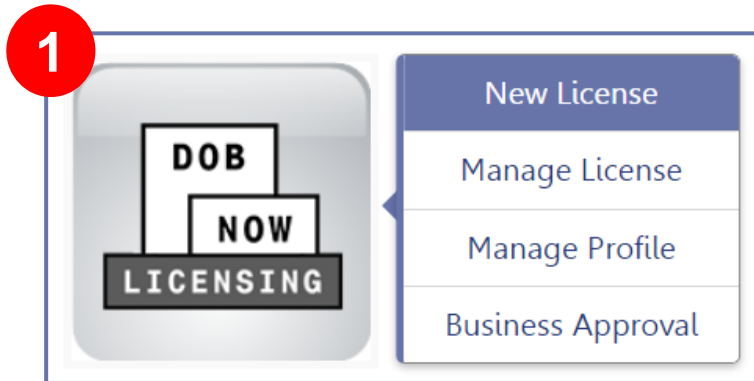


## HOW TO APPLY FOR A NEW LICENSE

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

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# 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.
- The answers to these questions will determine which documents will be required. (See [Required Documents List](#) for details.)
- 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 shows the DOB NOW user interface. At the top, it says 'DOB NOW' and 'Welcome, ADAM JOE2'. Below this, there's a section for 'Account Details' with 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.' To the right of this message is a button for 'License Types Information'. Below the message, the user's name 'ADAM JOE2' and email 'Email: ajoetest2@gmail.com' are displayed. To the right, there's a table for 'Address Information' with an 'Edit' button. The table contains the following data:

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)

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- 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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The screenshot displays a web application interface. At the top, a dark blue header contains the text 'HOW TO APPLY FOR A NEW LICENSE' and a 'DOB NOW' badge. Below the header, a table titled 'Business Information' is visible. A red box highlights a '+ Add Business Information' button in the top-left corner of the table. The table has columns for 'Actions', 'Business Information Type', 'Business Name', and 'Business ID'. 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

DOB  
NOW

- 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.\*

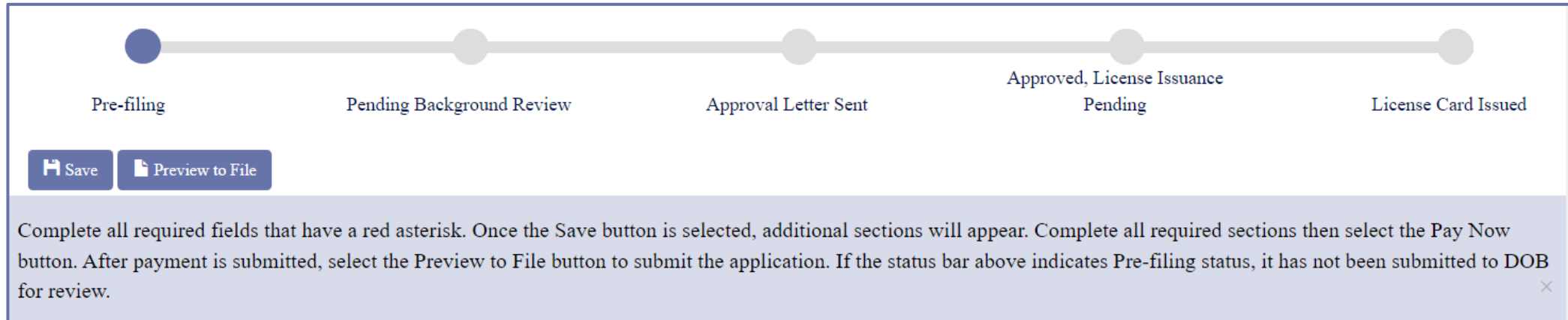
Name

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 form interface. At the top left, there are two buttons: 'Save' and 'Preview to File'. Below these is a sidebar menu with five 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 a section titled 'Employment History\*' with 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

**Save** **Cancel**

- 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.

- 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 | 15 Items Per Page | 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

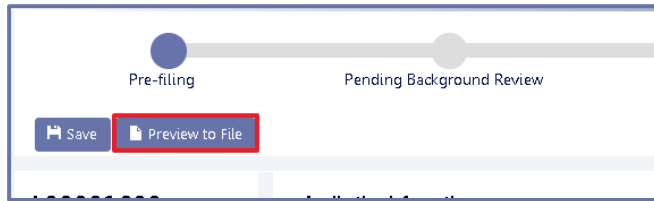
- Click the **Pay Now** button at the bottom of the toolbar on the right to pay the fee.
- Pay the amount **in full**. Partial payment is not an option.

The screenshot displays a web application interface for a new license application. At the top, a progress bar shows five stages: Pre-filing, 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 is a sidebar menu with options: 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. 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 is a vertical toolbar with icons for Dashboard, Application Highlights, View Filing, Trace History, Payment History, and a red-bordered button labeled '\$600.00 Pay Now'.

# 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**.

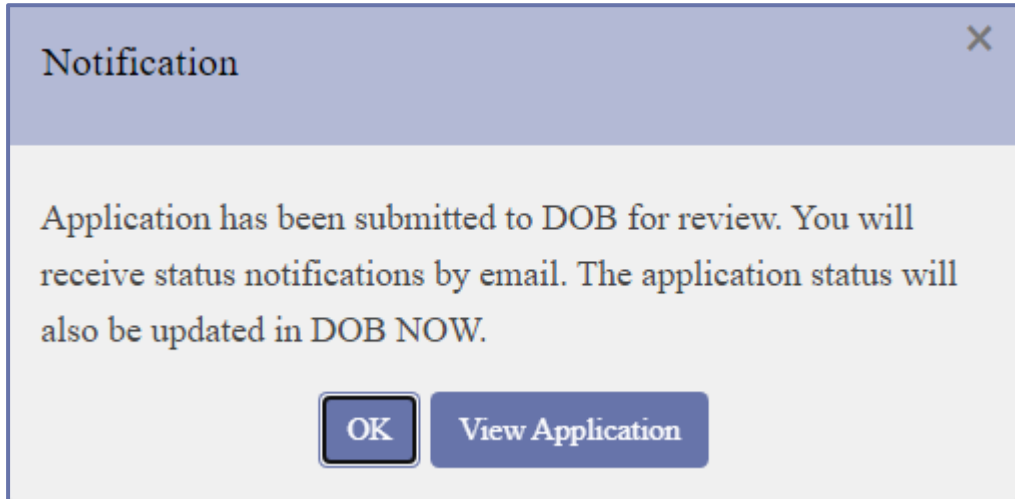


I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

Name  Date   
(Electronically Signed)

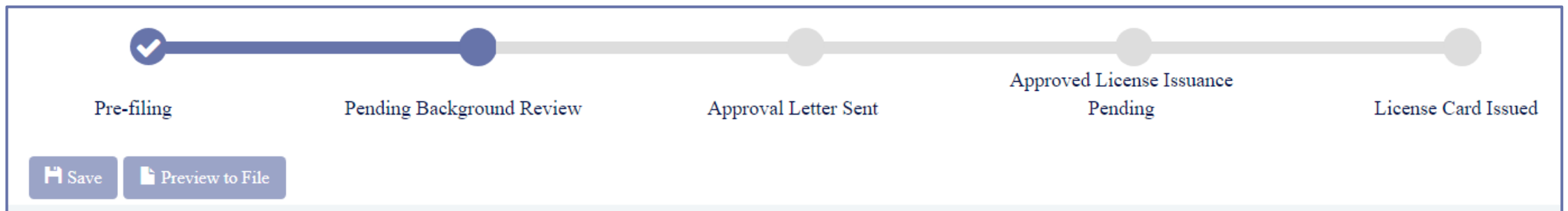
**File**

# NEW LICENSE – APPLICATION FILED

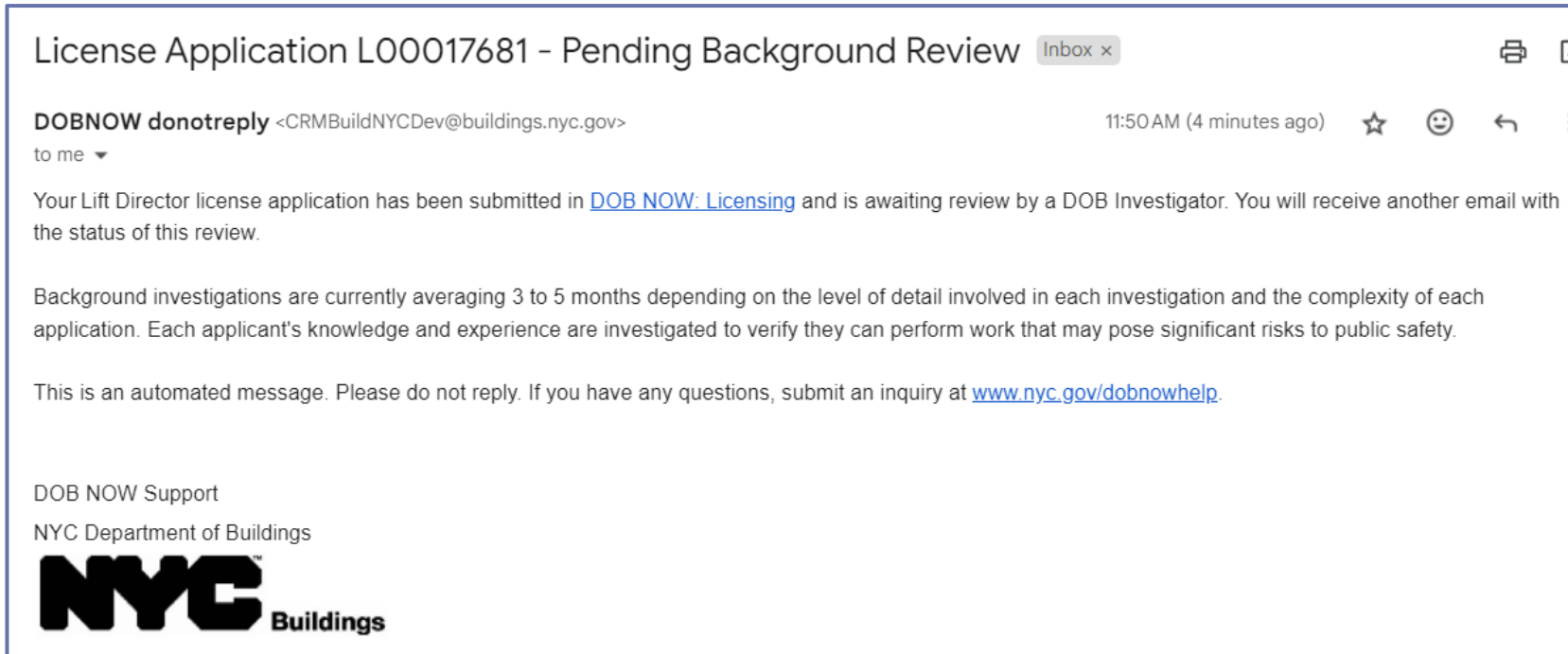


- Click **OK** on the Notification pop-up.

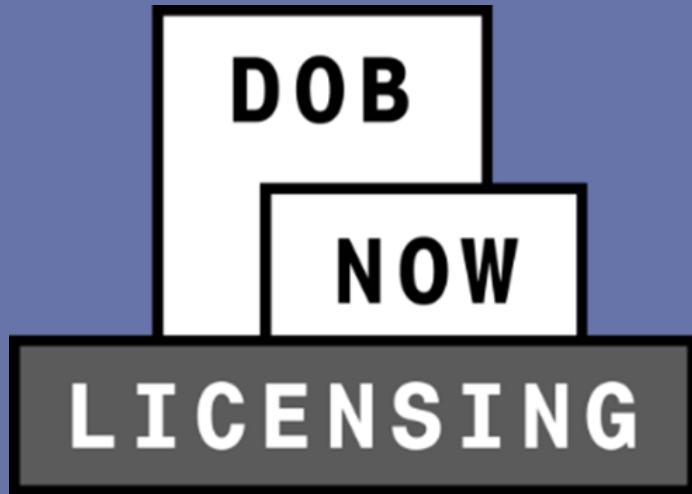
- The Status Bar will update to **Pending Background Review**.



# 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 ▾

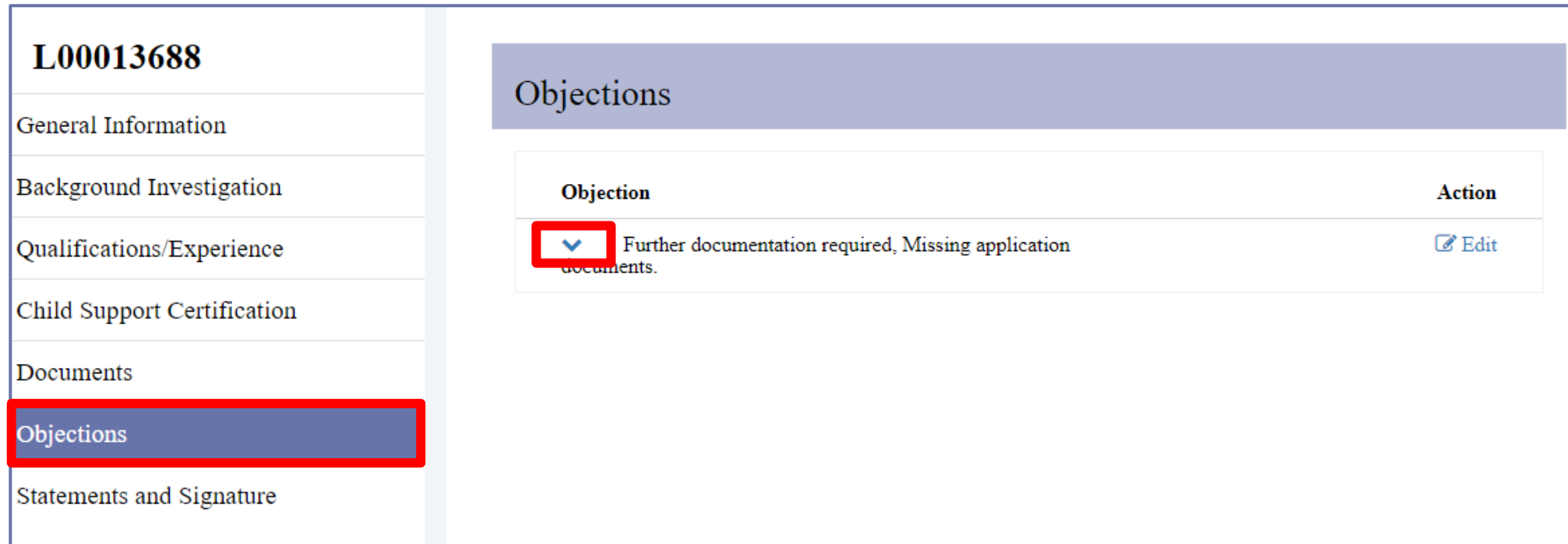
During the review of your application for Hoisting Machine Operator , the unit raised the following objection(s):  
4/2/2024 12:39 PMWrong document uploaded for W2

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](http://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.	<a href="#">Edit</a>



- 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
<a href="#">^</a> Further documentation required, Missing application documents.	Open	 Update

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					

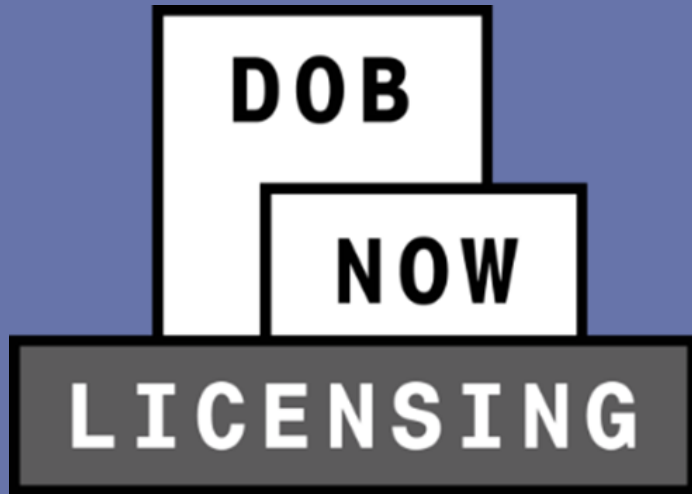
# REQUESTING RECONSIDERATION

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 'Documents' tab of a web application. 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 a navigation menu with 'Documents' selected. The main content area displays 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.

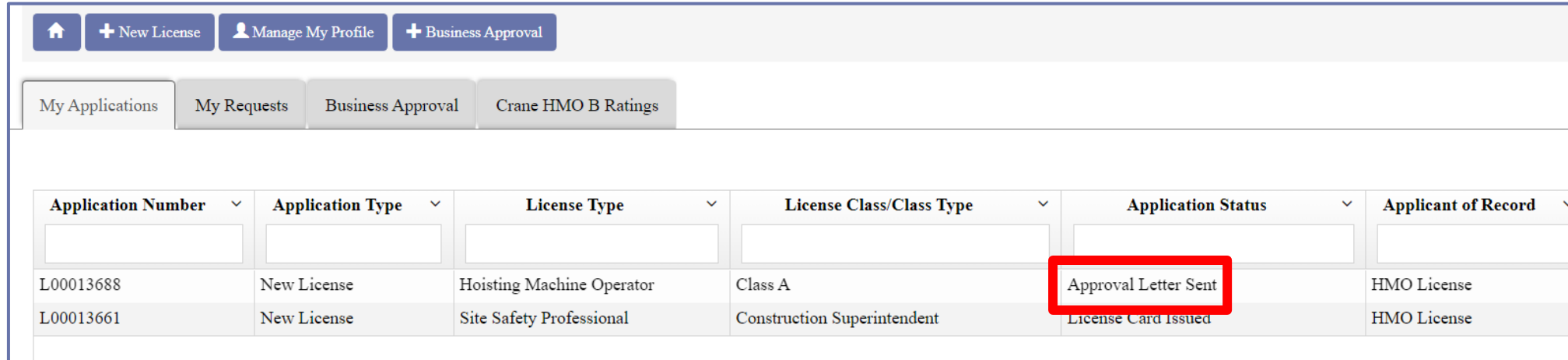
Your application for a NYC DOB Hoisting Machine Operator license has been Approved. To obtain your license, you are required to schedule an appointment. Log in to [DOB NOW: Licensing](#), open the license application and click on the **Appointments** tab.

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

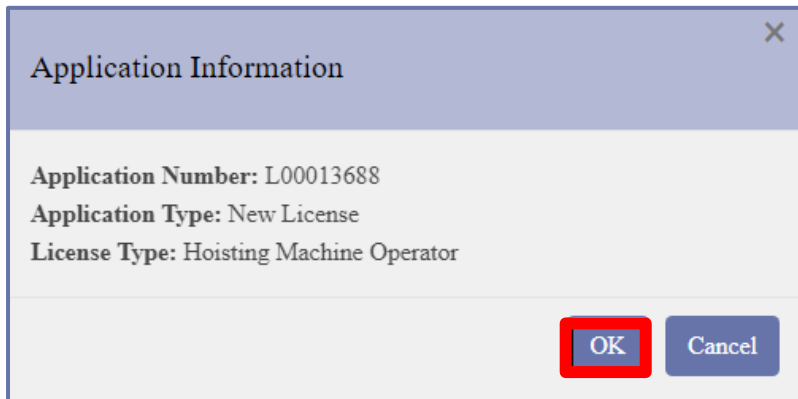
DOB NOW Support  
NYC Department of Buildings



# GETTING THE LICENSE



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.

The screenshot displays a user interface for license L00008604. On the left is a vertical navigation menu with the following items: General Information, Background Investigation, Qualifications/Experience, Documents, Appointments (highlighted in blue), and Statements and Signature. The main content area is titled 'Appointments' and contains a red-bordered button labeled '+ Schedule Appointment'. Below the button is a table with the following headers: Subject, Time, Status, and Action.

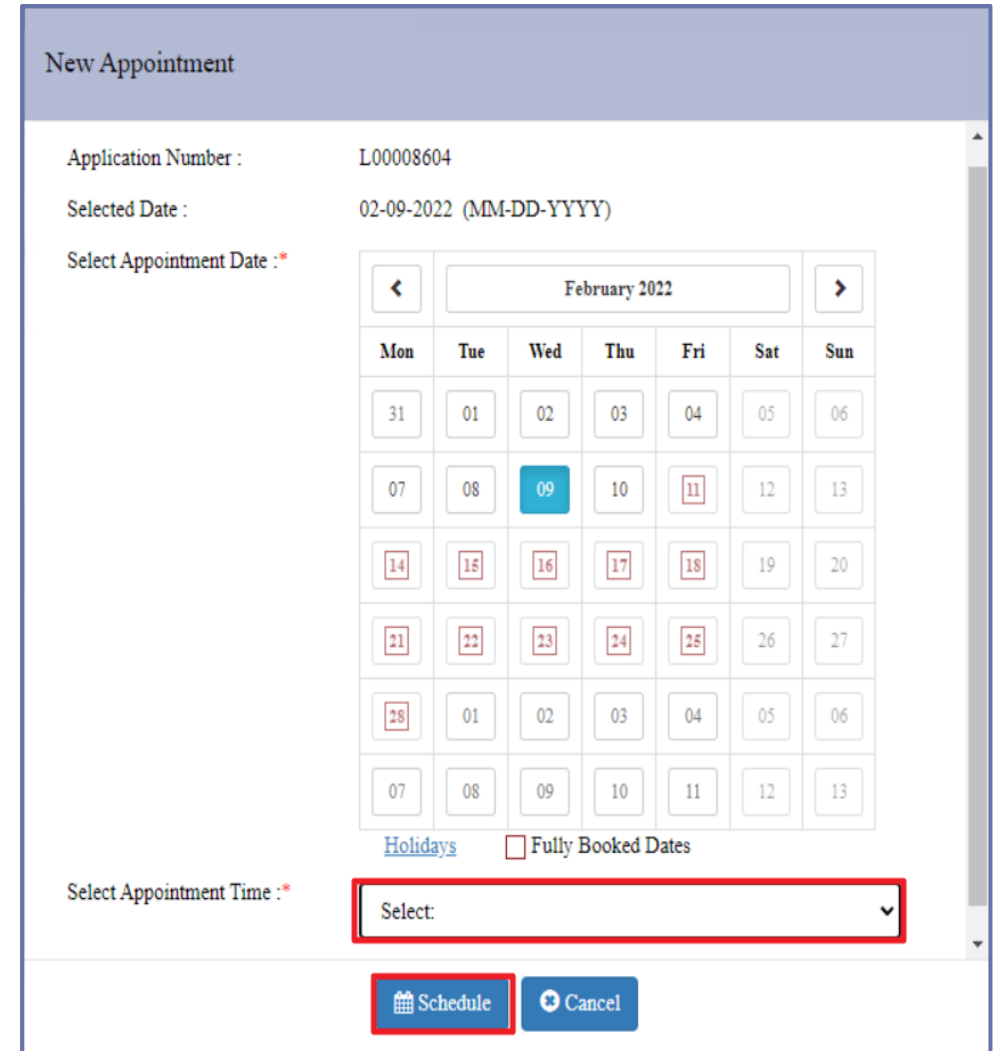
Subject	Time	Status	Action
---------	------	--------	--------



# 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.



The "New Appointment" window displays the following information:

- Application Number : L00008604
- Selected Date : 02-09-2022 (MM-DD-YYYY)
- Select Appointment Date :\*

A calendar for February 2022 is shown, with the 9th of February selected. The calendar grid is as follows:

Mon	Tue	Wed	Thu	Fri	Sat	Sun
31	01	02	03	04	05	06
07	08	09	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	01	02	03	04	05	06
07	08	09	10	11	12	13

Below the calendar, there are links for "Holidays" and a checkbox for "Fully Booked Dates".

Select Appointment Time :\*

A dropdown menu is shown with "Select:" and a downward arrow.

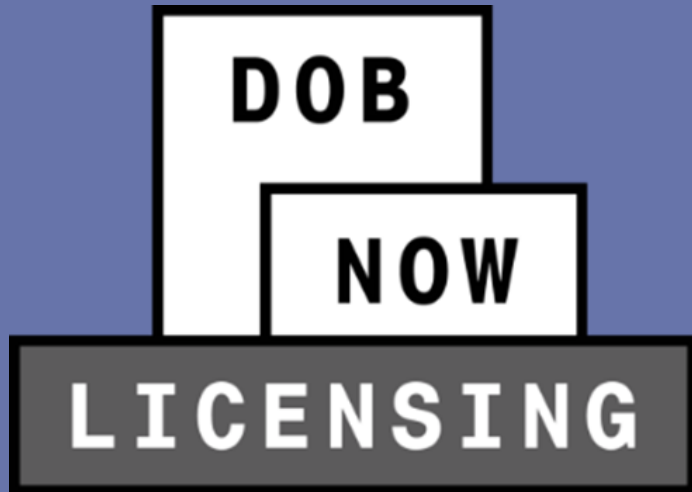
At the bottom, there are two buttons: "Schedule" (highlighted with a red border) and "Cancel".

Appointments

+ Schedule Appointment

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

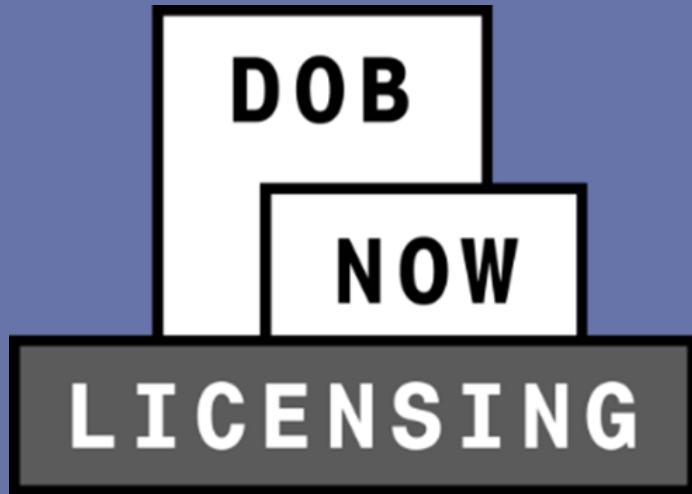
- The appointment details will be listed on the tab. If there is a need to cancel the appointment, it can be done from here.
- An email notification is sent confirming the appointment. The Licensing Unit is located at **280 Broadway, 1st Floor in Manhattan**. The applicant is required to attend the appointment; 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.



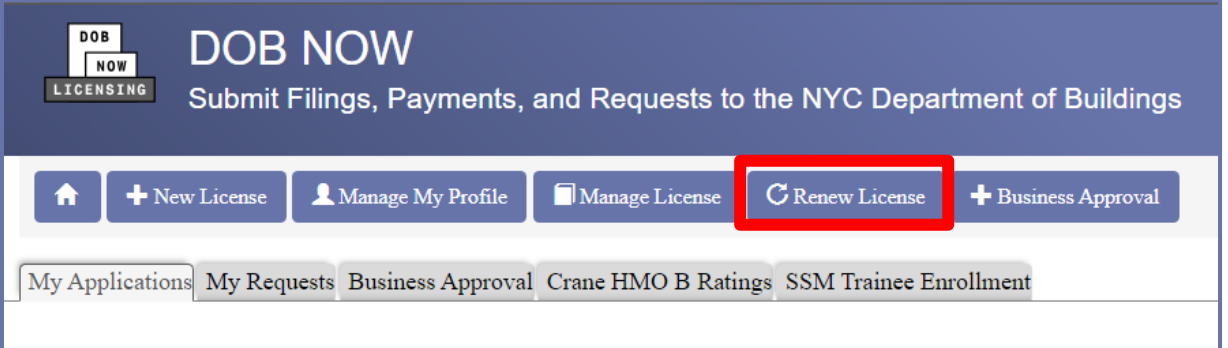
## MANAGE LICENSES

Renew License

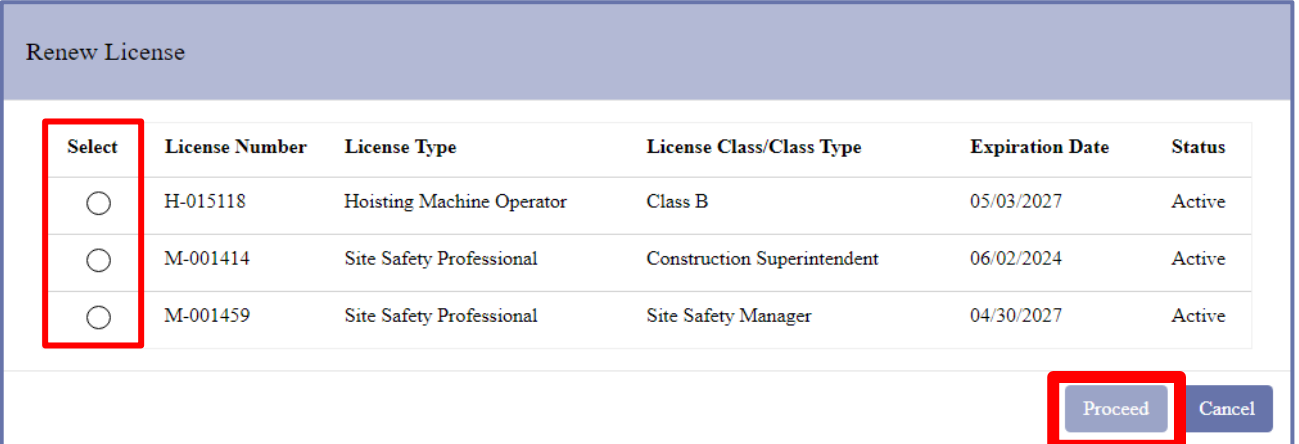
# RENEW LICENSE – CREATE APPLICATION

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.



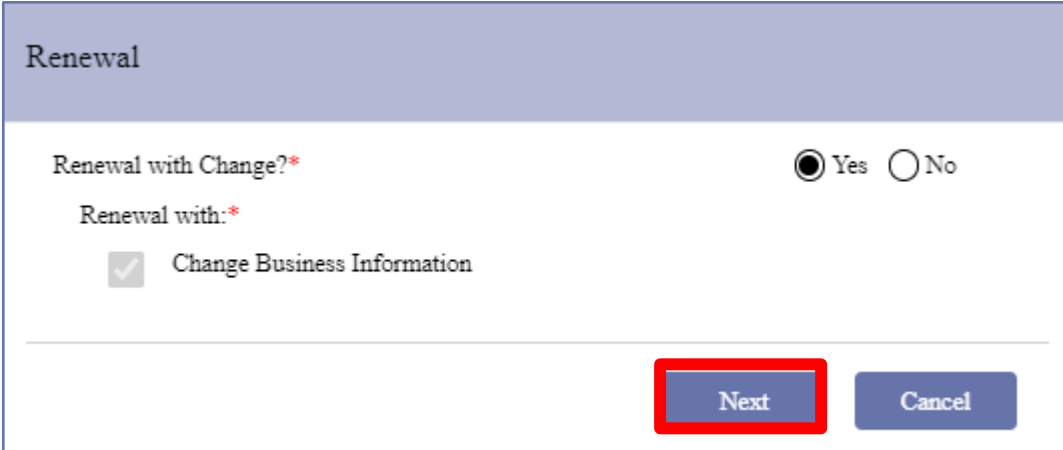
The image shows a pop-up window titled "Renew License". It contains a table with the following columns: Select, License Number, License Type, License Class/Class Type, Expiration Date, and Status. The "Select" column contains three radio buttons, each in a red box. A red arrow points from the text in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

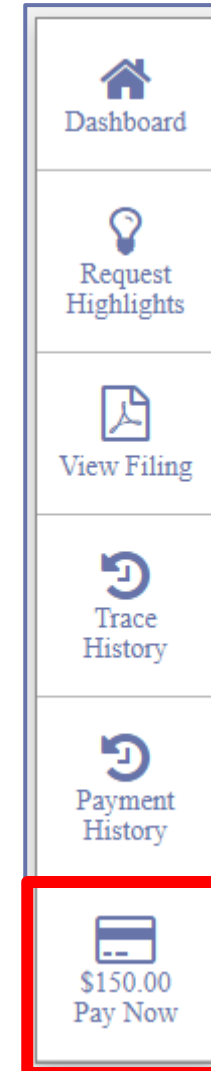
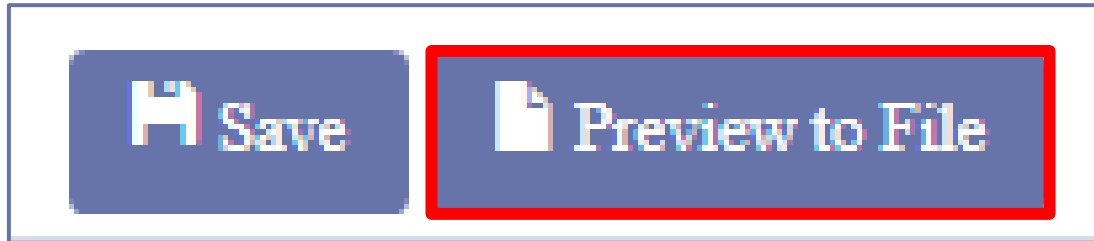
Statements and Signature

- 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

DOB  
NOW

- 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**.

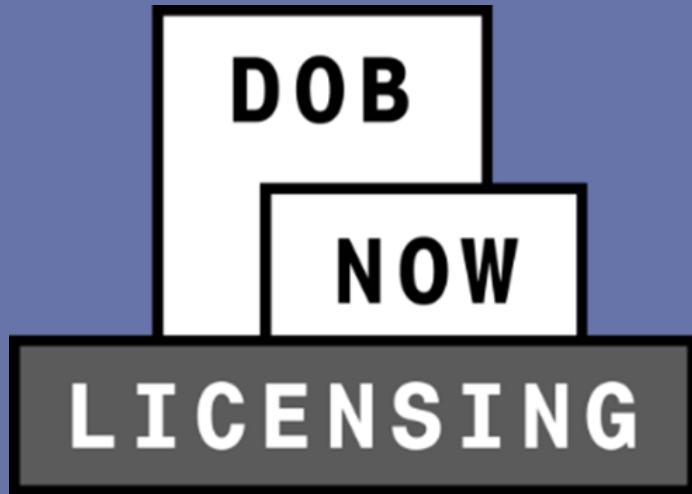


# RENEW LICENSE – APPLICATION STATUS

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

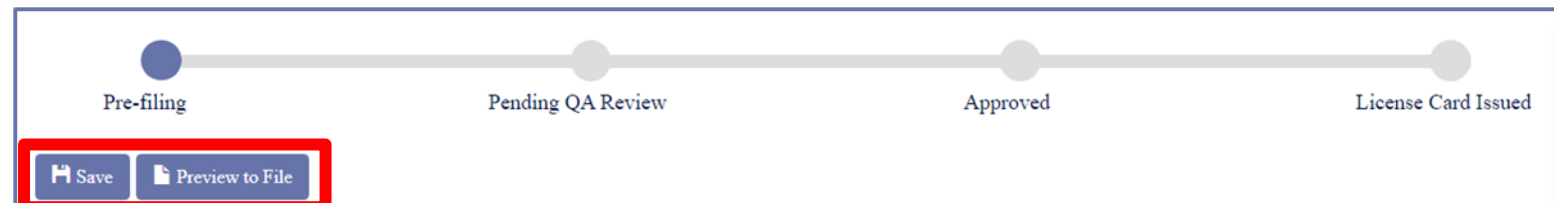
Qualifications/Experience

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.

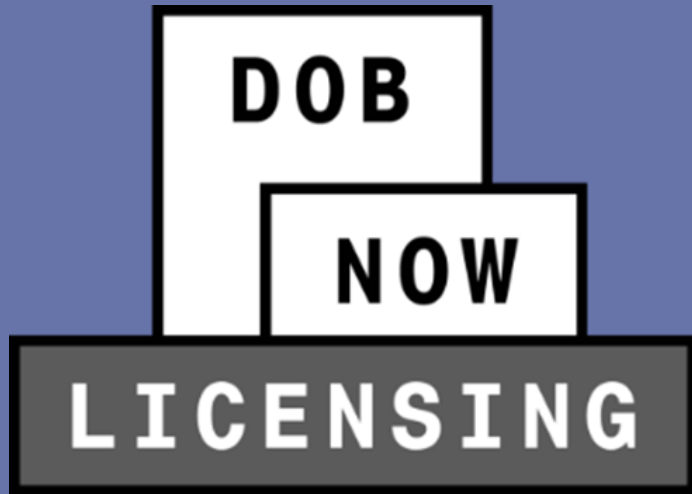




# REISSUE LICENSE – NEW LICENSE CARD ISSUED

- 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

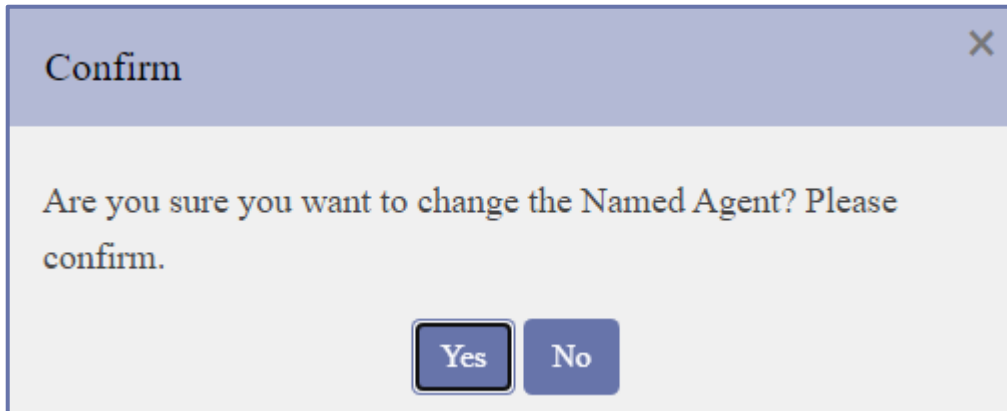
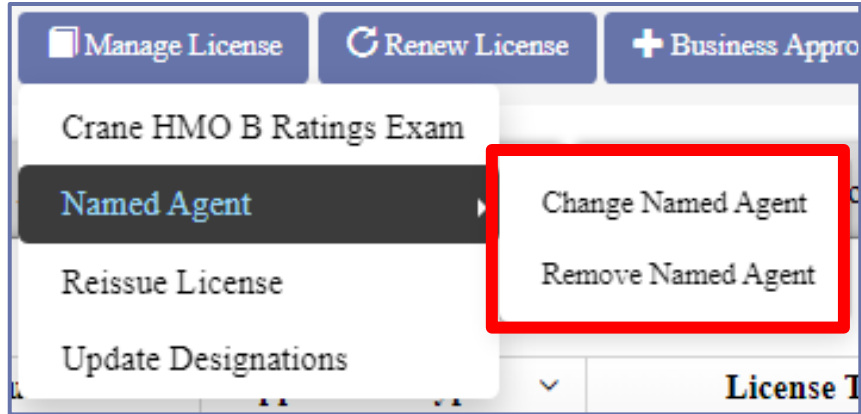


## MANAGE LICENSES

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**.



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

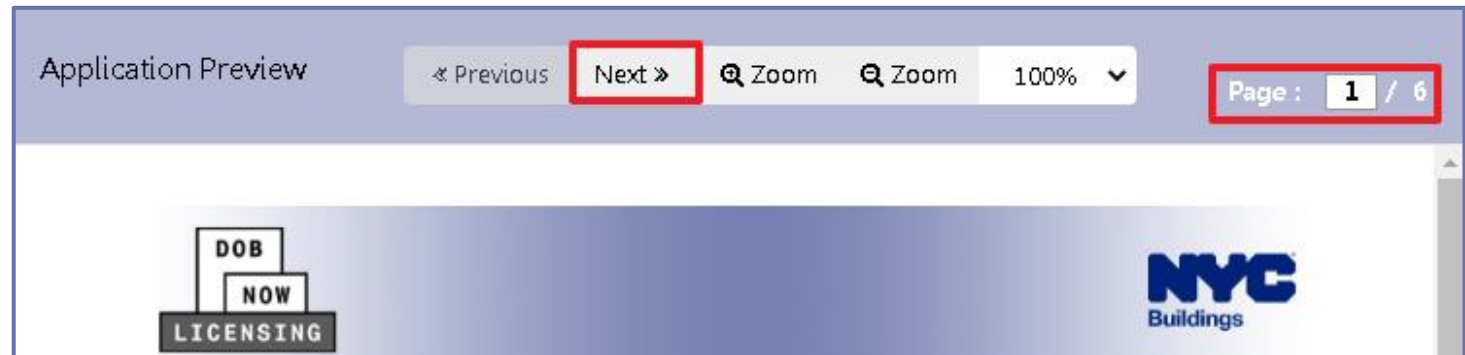
- Once the information on the General Information tab is saved, a **Request Number** will be generated.
- Click the checkbox to Attest on the **Statements & Signature** tab.

# CHANGE NAMED AGENT – FILE THE REQUEST

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

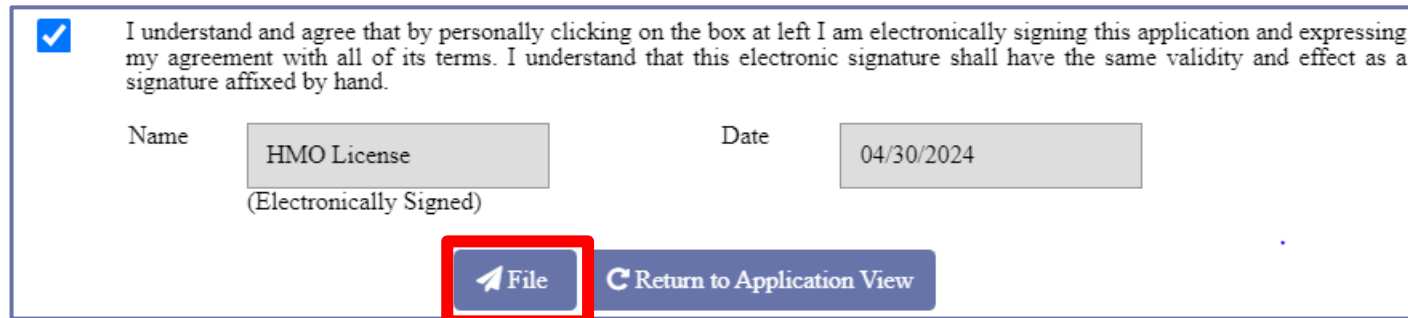


A screenshot of a web application menu. At the top, there are two buttons: 'Save' and 'Preview to File'. The 'Preview to File' button is highlighted with a red rectangular box. Below the buttons, the application ID 'CR00001189' is displayed. Underneath, there are two menu items: 'General Information'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

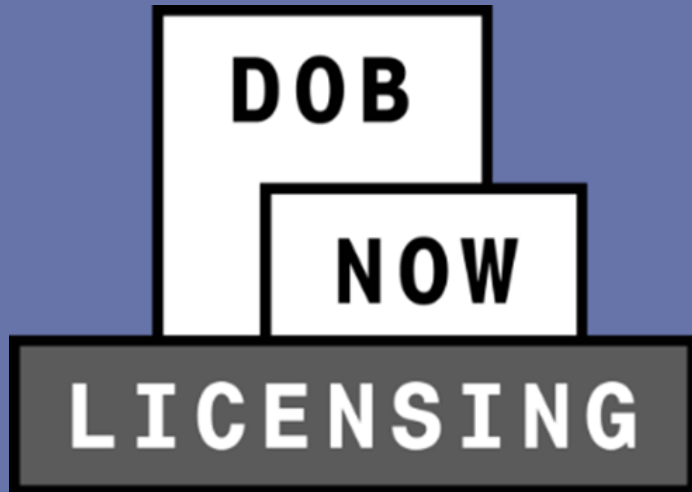


A screenshot of the 'Application Preview' interface. At the top, there are navigation controls: '< Previous', 'Next >', 'Zoom', and '100%'. The 'Next >' button is highlighted with a red rectangular box. On the right side, there is a page indicator 'Page : 1 / 6', also highlighted with a red rectangular 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.



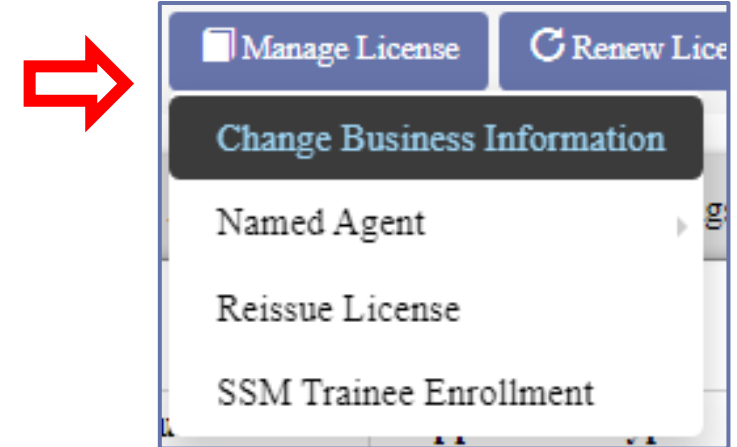
## **MANAGE LICENSES**

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'. In the 'Request Information' section, there are 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 in the top left corner of the form is highlighted with a red box.

Request Information				
Request Type*	License Type*	License Class/Class Type*		
Change Business Information	Site Safety Professional	Site Safety Manager		
License Number*	001459			
Business Information				
Actions	Business Information Type	Business Name	Business Email	Business Address



# BUSINESS INFORMATION – ADD BUSINESS

- 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.

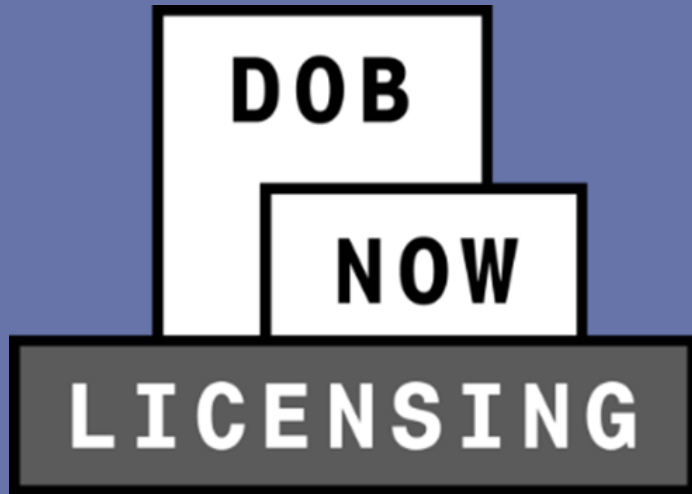
In the event of an accident that involves my actions undertaken in connection with my license/registration and/or qualification, I understand that the Administrative Code requires that I cooperate with any investigation and that failure to do so may result in immediate suspension, revocation or other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

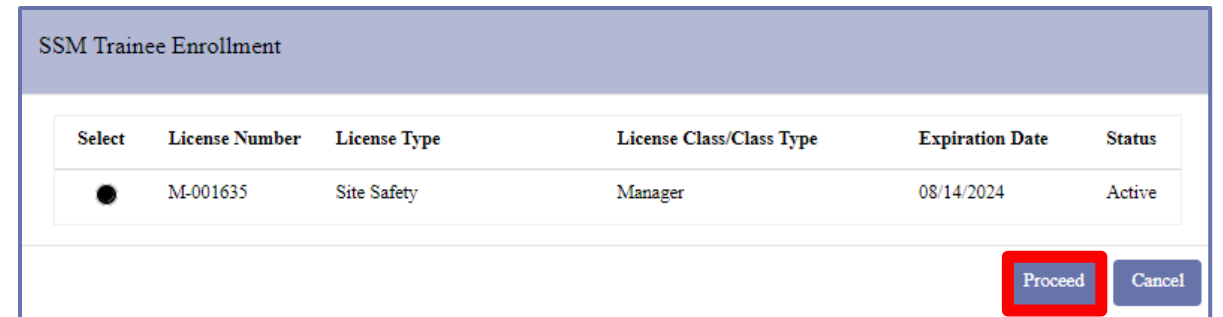
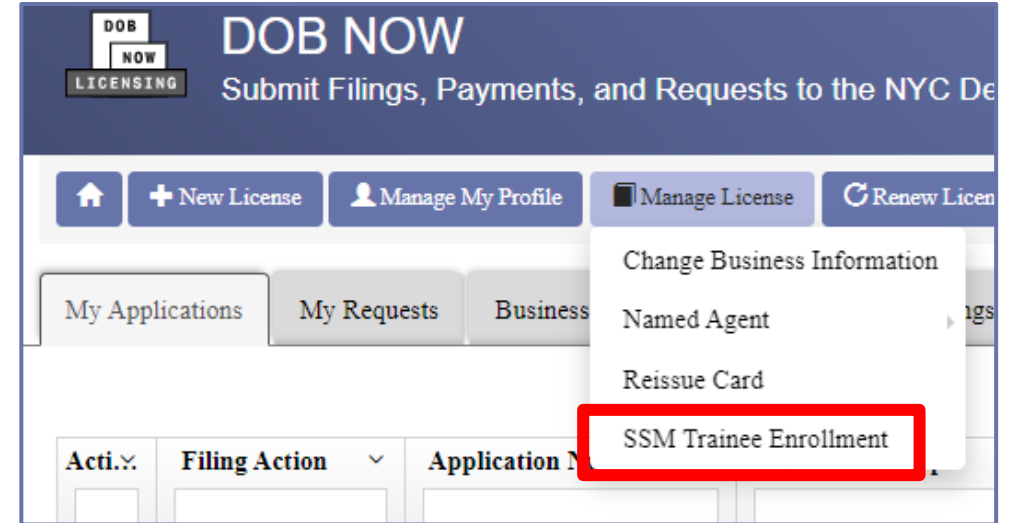


**18-MONTH TRAINEE ENROLLMENT**

- One option for training as a Site Safety Manager is to complete an **18-month on-the-job Site Safety Manager training program** under the direct supervision of a certified Site Safety Manager during the construction or demolition of major buildings in New York City.
- The supervising Site Safety Manager **registers the trainee** with the Department prior to the commencement of the training program and **certifies the trainee's satisfactory completion** of the training program at its conclusion.
- Up to three (3) trainees can be registered at a time.
- This registration and certification can now be completed through DOB NOW: *Licensing*.

# 18-MONTH TRAINEE ENROLLMENT

- The Site Safety Manager logs into DOB NOW: *Licensing* with the email address associated with their license.
- Hover over the **Manage License** button and select **SSM Trainee Enrollment**.
- Select your Site Safety Manager license and click on **Proceed**.



# 18-MONTH TRAINEE ENROLLMENT

DOB  
NOW

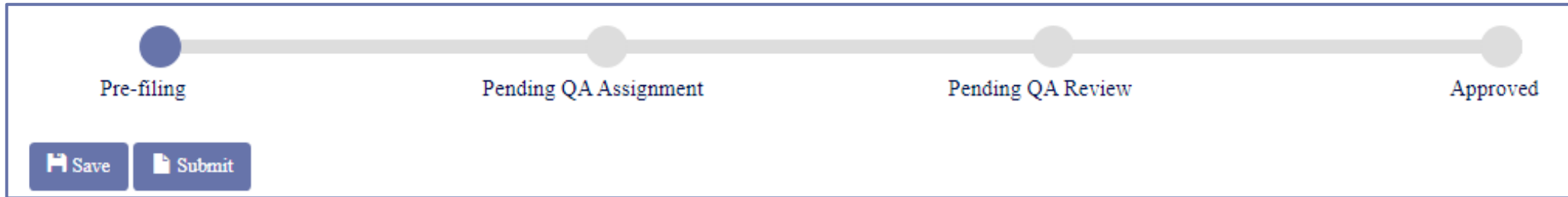
Trainee Information		
Training Start Date* 05/06/2024	Trainee First Name* SSP	Trainee Last Name* License
Trainee Telephone#* (212) 555-5555	Trainee Email* ssplicense01@gmail.com	Training End Date* 09/08/2025

- Fill in all **Trainee Information**. The trainee does not need to be a registered DOB NOW user.
- The form can be **Saved** prior to completion of the training program, but you will not submit it before the **Training End Date**.



# 18-MONTH TRAINEE ENROLLMENT




- Once the form is saved, the **Status Bar** will appear, as will a new Documents tab.
- The SSM Trainee Enrollment Form goes through **QA review** for approval.



- In order to submit the form, supervising SSMs must upload the **18-Months Training Program (Monthly Summaries)** document.

Documents\*

+ Add Document

Actions	Document Type	Document Status
  	18 Months Training Program (Monthly Summaries)	Required

SSM Comments ▼

Was there satisfactory completion of the training program?\*  Yes  No

Comments\*

3000 characters remaining

- The supervising SSM must also fill out the **SSM Comments** section on the **General Information** tab.
- Once all information is entered, the Form may be Submitted.

# 18-MONTH TRAINEE ENROLLMENT

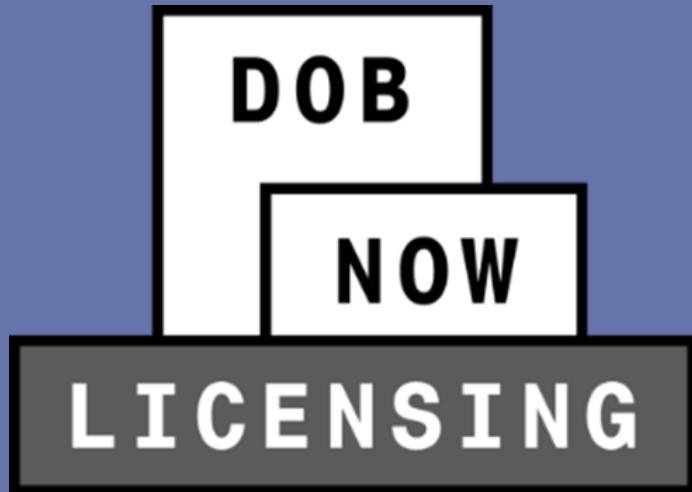
DOB  
NOW

My Applications My Requests Business Approval Crane HMO B Ratings **18-Month Trainee Enrollment**

Refresh

Training Start Date	Trainee First Name	Trainee Last Name	Trainee Telephone	Trainee Email	Training E
05/05/2024	SSP	License	2125555555	ssplicense01@gmail.com	09/07/2025

- Registered 18-Month Trainees will be visible on the **18-Month Trainee Enrollment** tab of the DOB NOW: *Licensing* dashboard.



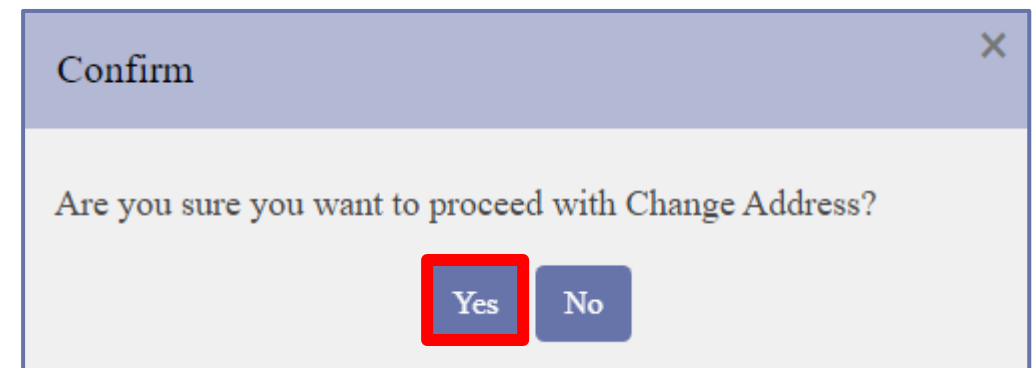
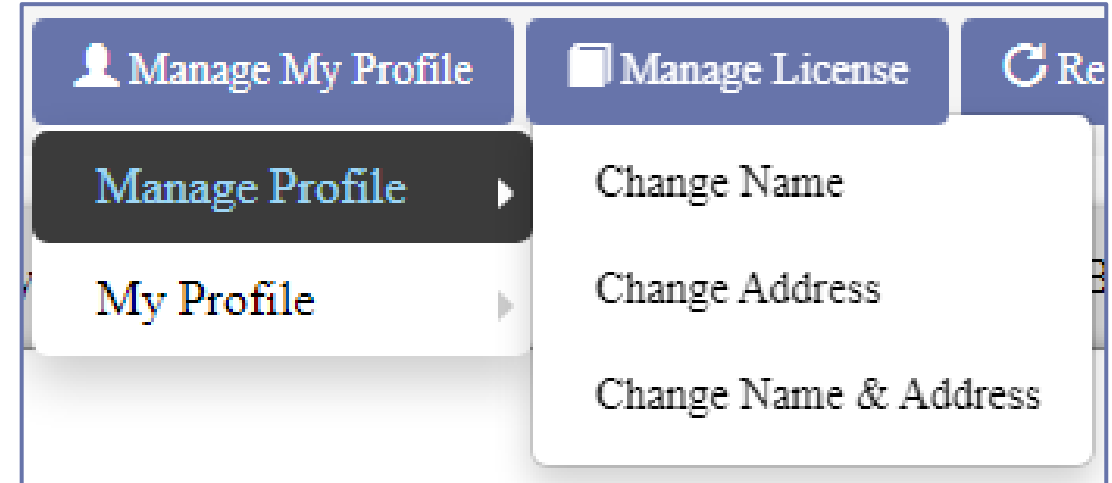
## MANAGE PROFILE

Update License Holder Name or Address

# MANAGE PROFILE – UPDATE LICENSE HOLDER INFORMATION

DOB  
NOW

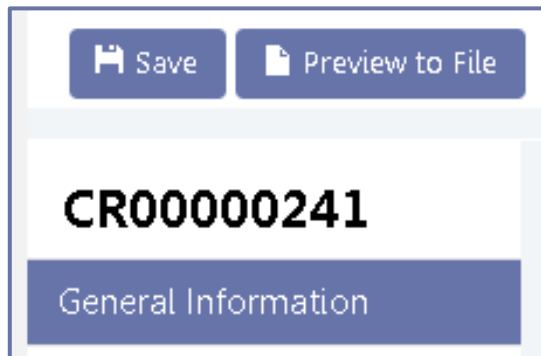
- To update the Licensee's **name** and/or **address**, hover over the **Manage My Profile** button on the dashboard and select **Manage Profile**.
- From there, make a selection:
  - **Change Name**
  - **Change Address**
  - **Change Name & Address**
- A notification will appear to confirm the change.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



# UPDATE LICENSE HOLDER INFORMATION – NAME OR ADDRESS

DOB  
NOW

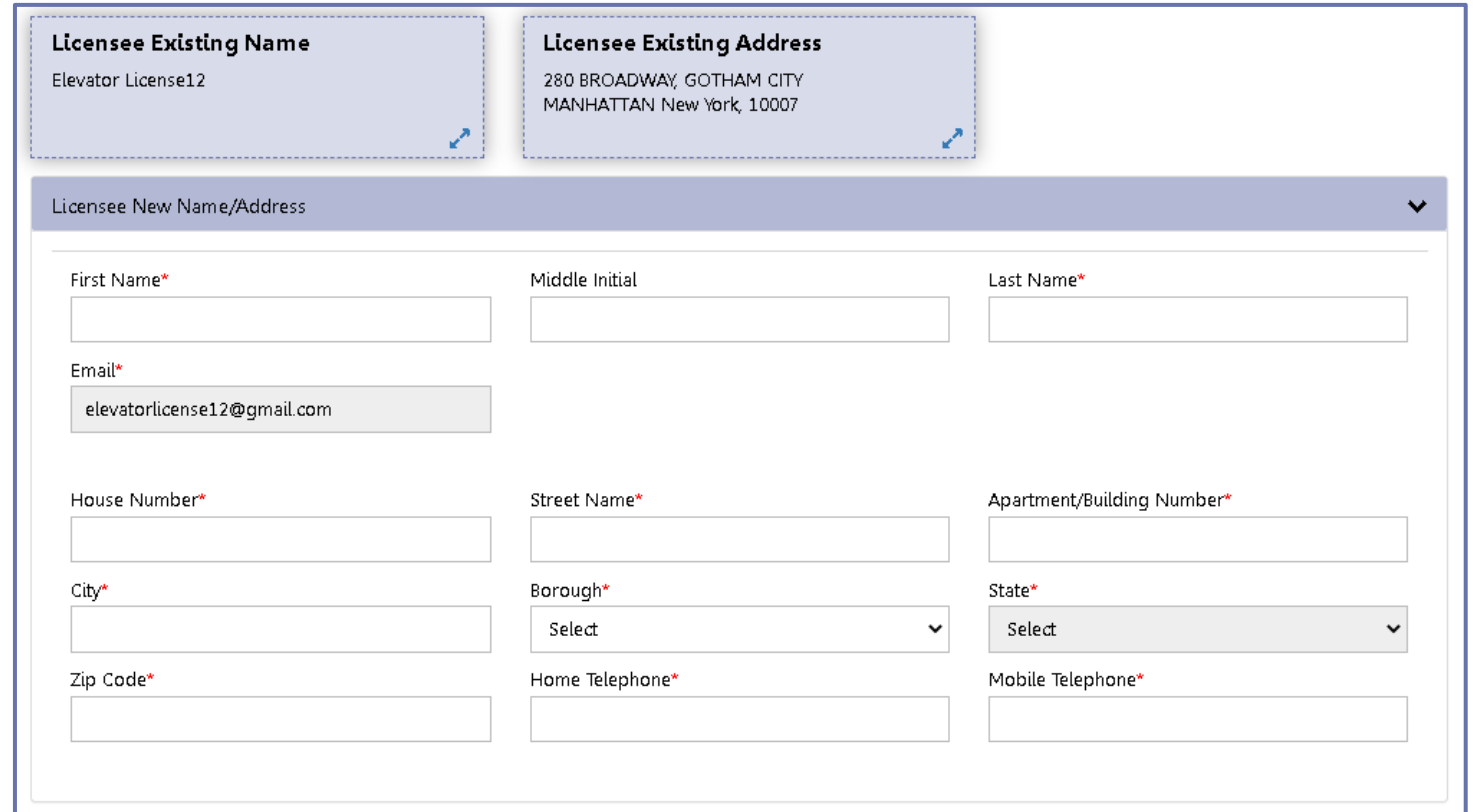
- The Applicant will be brought into a new window where they will see the existing information as well as blank boxes to **enter new information**.
- Once all information has been updated, click **Save** to generate a **Request Number**.



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.

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

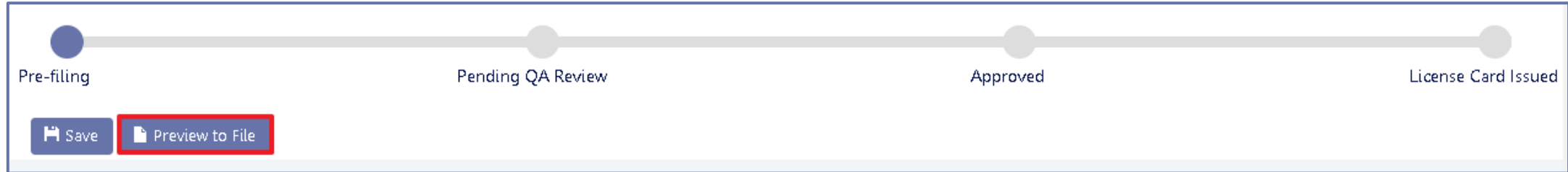
**CR00000241**

- **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.

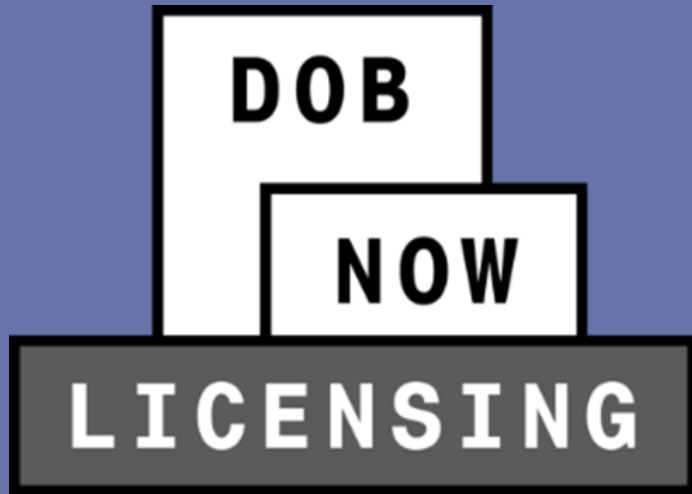
- Dashboard
- Request Highlights
- View Filing
- Trace History
- Payment History
- \$50.00  
Pay Now**

# UPDATE LICENSE HOLDER INFORMATION

DOB  
NOW

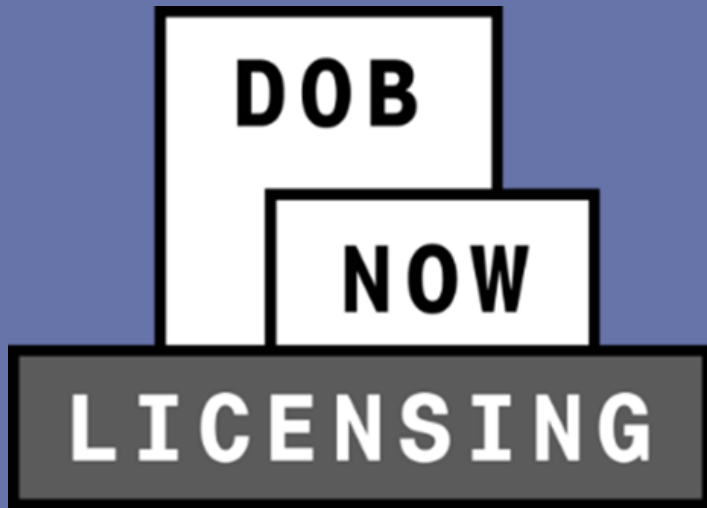


- Click **Preview to File** to submit the Request.
- If acceptable, **check the box** to attest on the final page.
- Click **File** to submit the request.
- Once the Licensing Unit has **Approved** the request, the applicant will receive an email notification and the new License Card in the mail within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



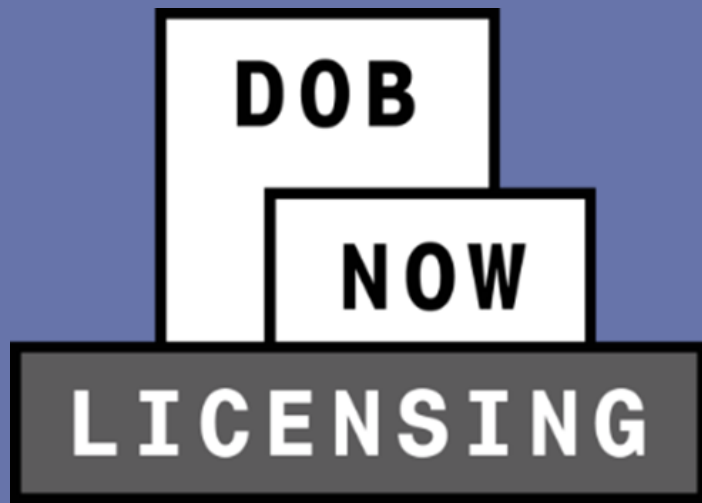
## IMPORTANT NOTES

- 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: *B/S 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?