

DOB NOW: *Licensing*

FALL 2024 RELEASE

LIFT DIRECTOR LICENSE

Industry Session

BEST PRACTICES FOR THE VIRTUAL CLASSROOM

DOB
NOW



Chat Feature



Mute Microphones



Ask Questions



Parking Lot

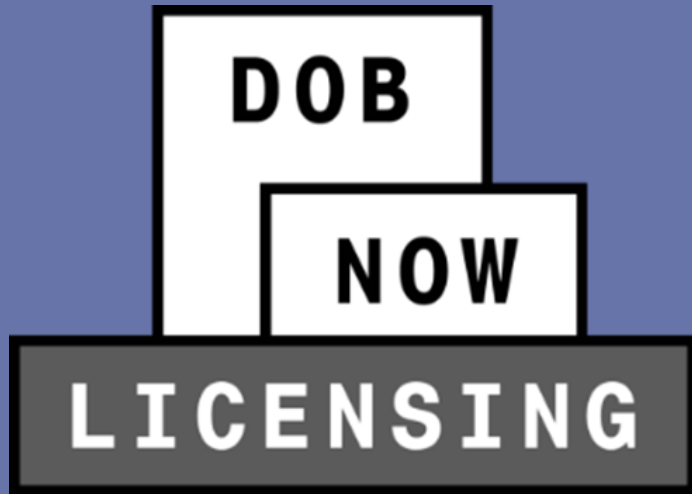


Feedback



Participate

- Overview of Lift Director License
- 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
- Update Name and/or Address
- Important Notes



OVERVIEW OF LIFT DIRECTOR LICENSE

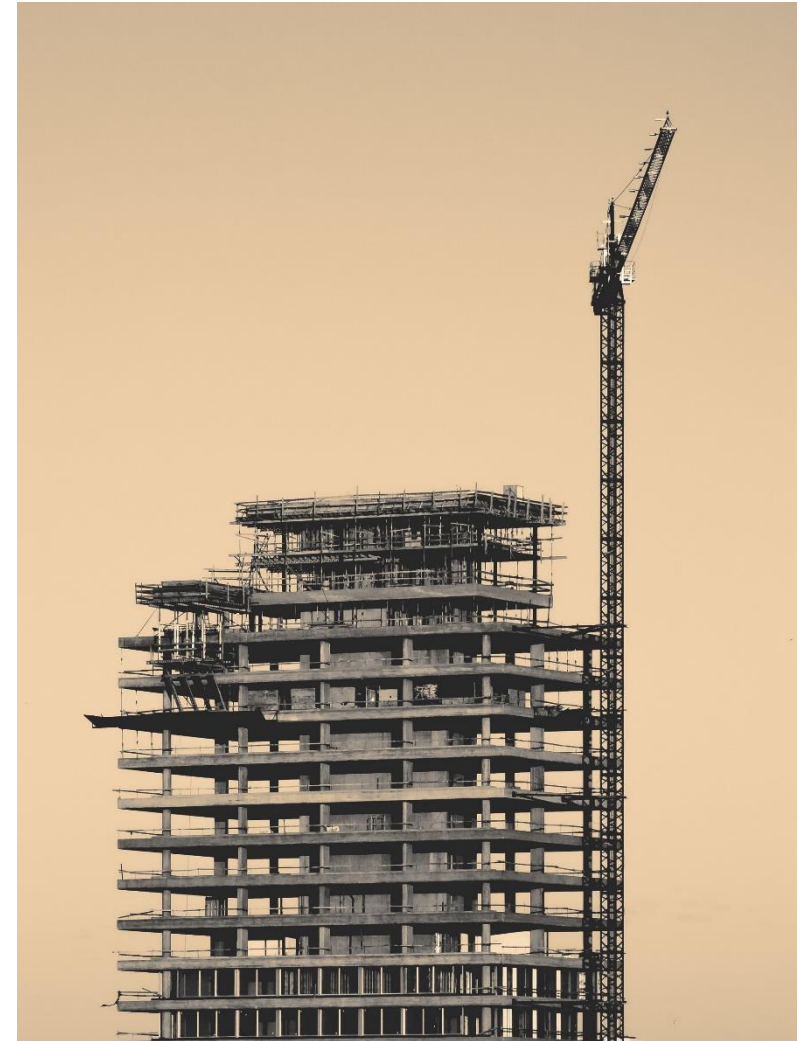
- NYC Administrative Code Section 28-424.2: **Beginning January 1, 2025**, anyone performing the duties of a Lift Director must be registered with the Department of Buildings as a Lift Director.
- **The duties** of a Lift Director are specified in [1 RCNY 3319-02](#).

LIFT DIRECTOR LICENSES - QUALIFICATIONS

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To become an **NYC-licensed Lift Director**, 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**



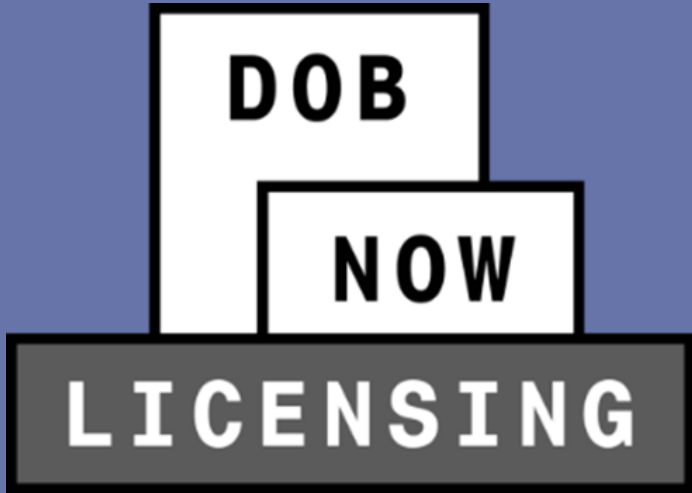
LIFT DIRECTOR LICENSE REQUIREMENTS – PROCESS OVERVIEW

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To become an **NYC-licensed Lift Director**, an applicant is required to:

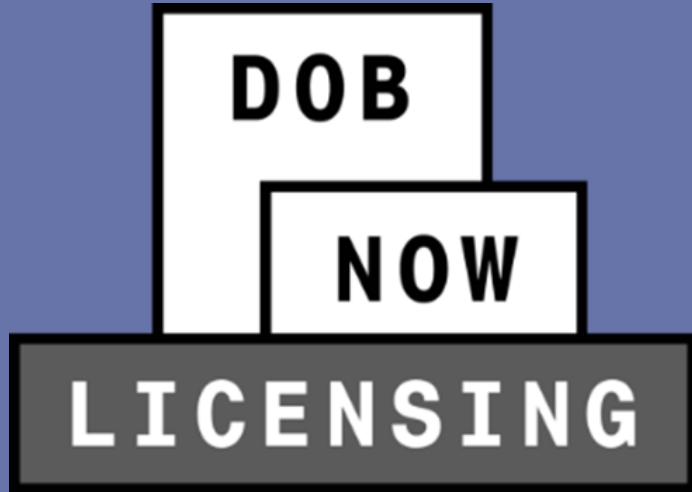
- Meet the **license criteria** (age, language, experience, etc.)
- Complete a **32-hour Lift Director training course**
- Begin the application in **DOB NOW: Licensing**
- Upload all **required documentation**
- Pay any **required fees**
- **Submit** the license application
- Once DOB approves the application, an **appointment** is scheduled in DOB NOW: *Licensing* to take a photo and **pick up the Lift Director License Card**.
- An Lift Director License is valid for **three years**.



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](#).

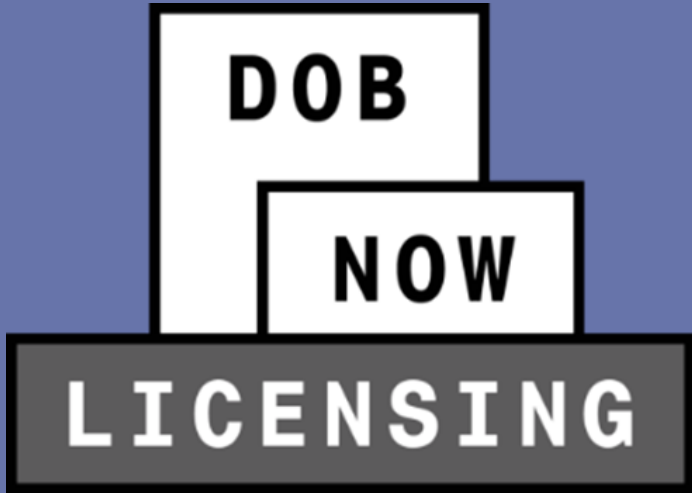


STATUSES

DOB NOW: *Licensing* – LICENSE REQUESTS STATUSES



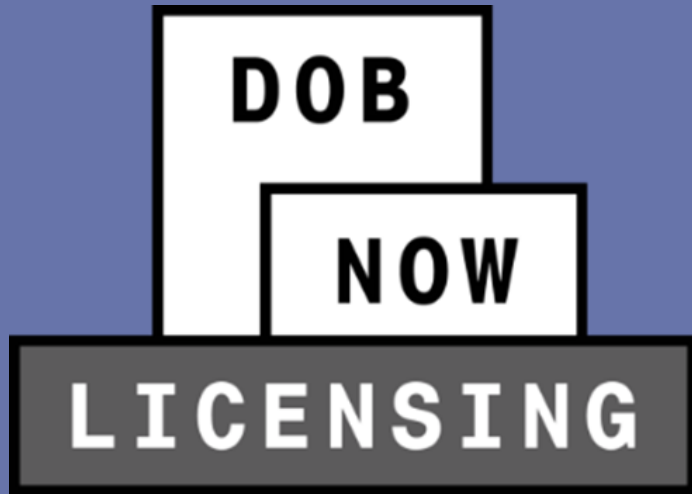
- All statuses that can apply to License Requests can be found in the [Licensing Statuses document](#).
- Links for all resources are on the [DOB NOW: Licensing Resources page](#).



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](#).

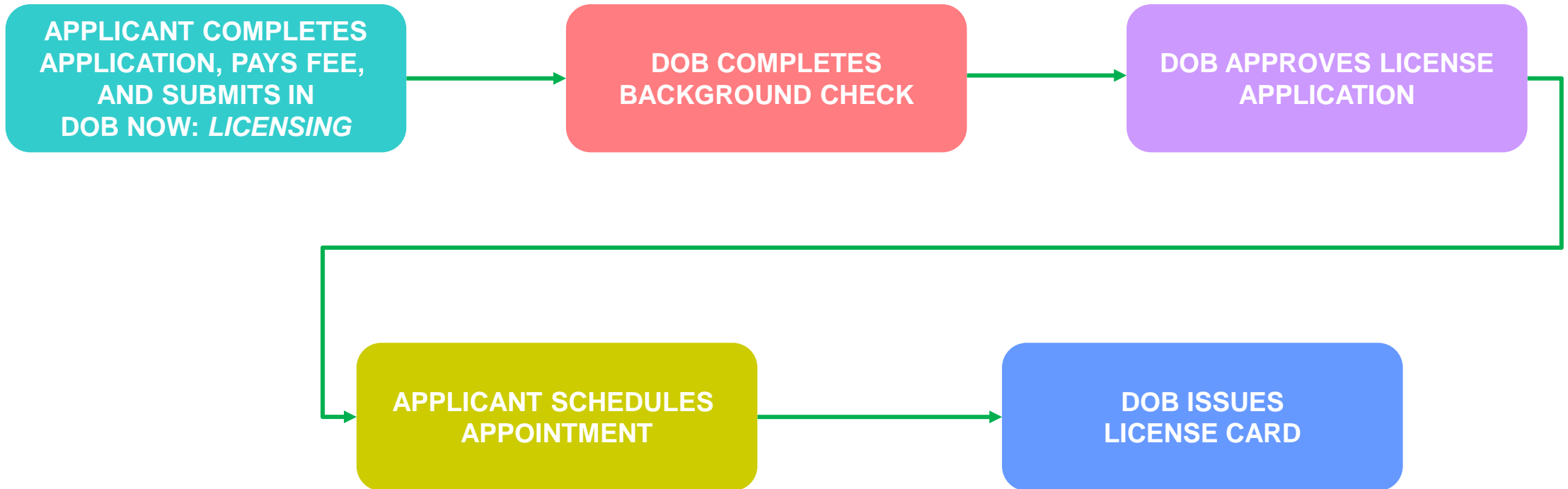
- All statuses that can apply to License Requests can be found in the [Licensing Statuses document](#).

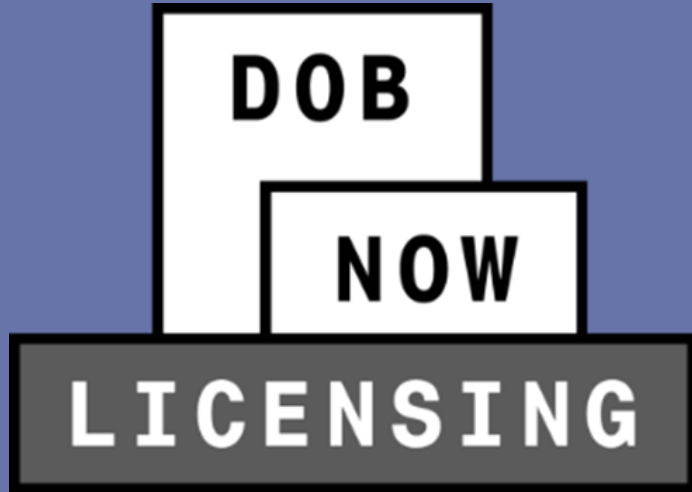


STEPS TO GET A LICENSE

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

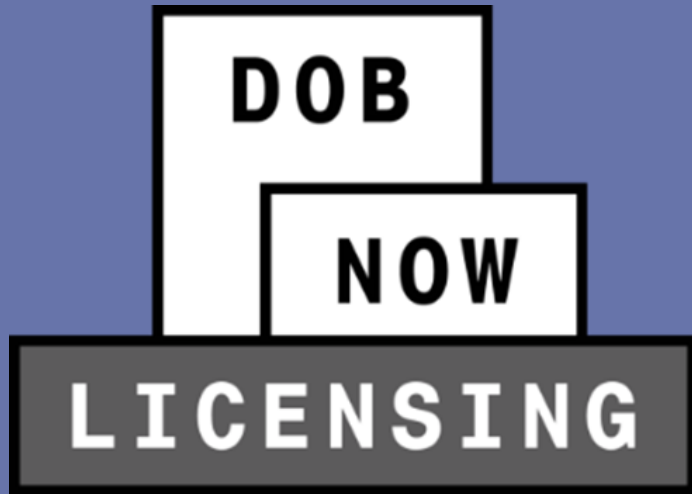
License Application Number *

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](#)

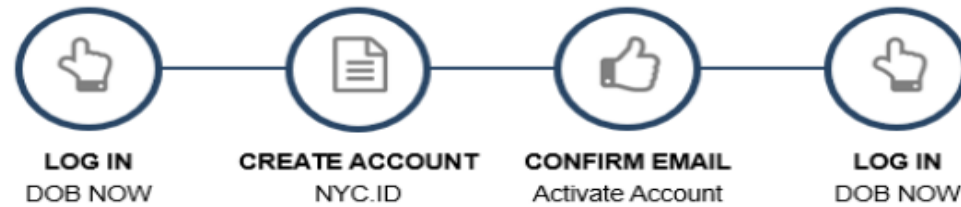
- Searching by a **License Application Number** will provide the details of the License Application.



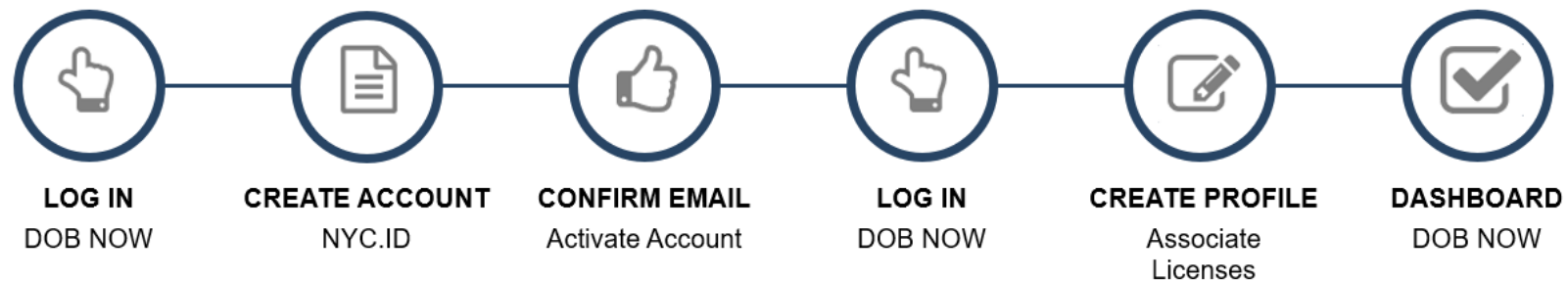
HOW TO LOG INTO DOB NOW: LICENSING

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

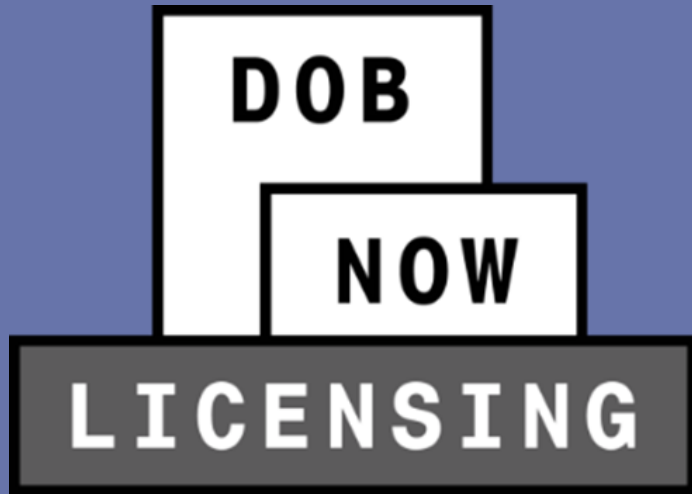
If you need an NYC.ID

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.

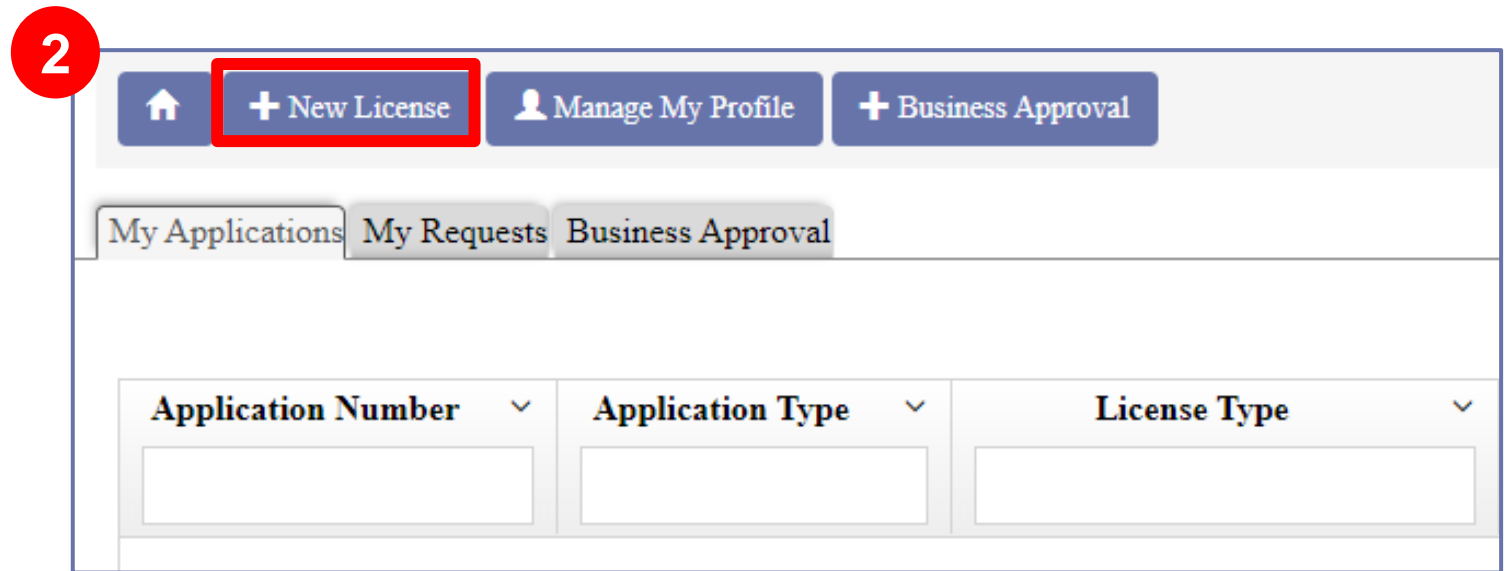
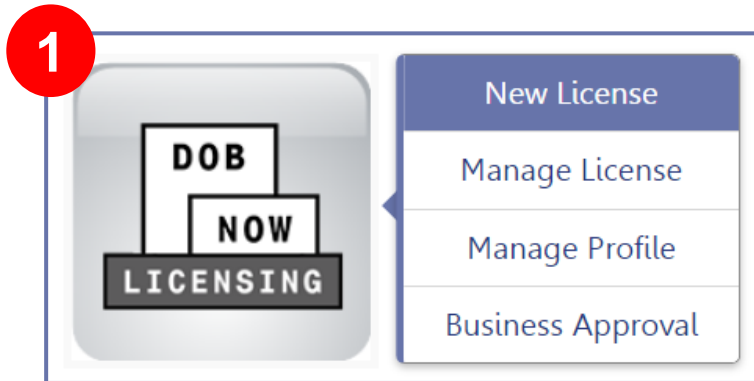


HOW TO APPLY FOR A NEW LICENSE

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

DOB
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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 shows 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'. Below this, the 'Account Details' section 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.' To the right of this message is a 'License Types Information' button. Below the message, the user's name 'ADAM JOE2' and email 'Email: ajoetest2@gmail.com' are displayed. To the right, the 'Address Information' section has an 'Edit' button (highlighted in red). Below this, a table shows address details:

| 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)

DOB
NOW

- 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

Notification

Application has been saved.

HOW TO APPLY FOR A NEW LICENSE

DOB
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The screenshot displays a web application interface. At the top, a dark blue banner contains the text 'HOW TO APPLY FOR A NEW LICENSE' and a 'DOB NOW' logo. Below the banner, a table titled 'Business Information' is visible. The table has columns for 'Actions', 'Business Information Type', and 'Business Name'. A red box highlights a '+ Add Business Information' button in the 'Actions' column. 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 field), 'Business Address*' (a text input field), 'City*' (a text input field), 'State*' (a dropdown menu with 'Select'), 'Zip*' (a text input field), 'Business Email*' (a text input field with placeholder text 'Enter email/username...'), and 'Business Phone*' (a text input field). 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.*

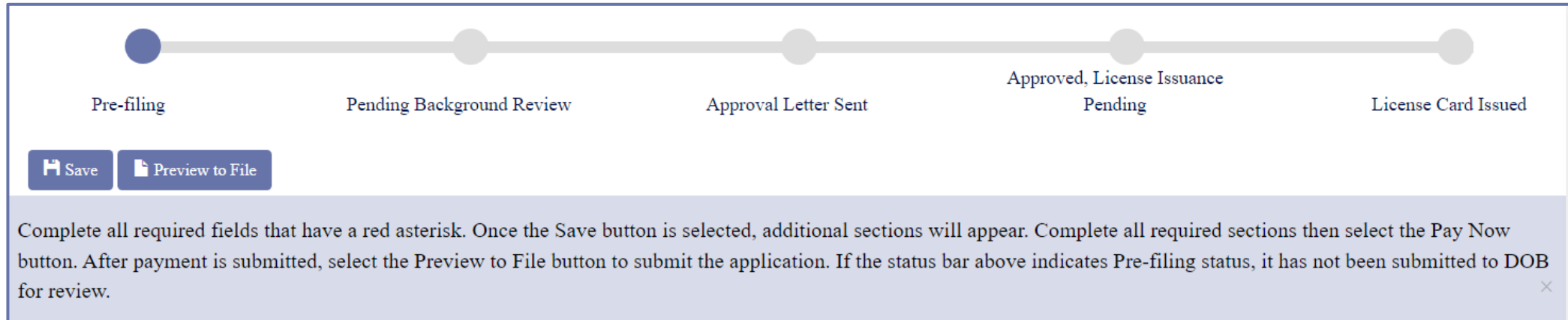
Name

Date

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

NEW LICENSE – STATUS BAR

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- 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

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- 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

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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**.

- 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

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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

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- 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

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- 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, there are two buttons: 'Save' and 'Preview to File'. Below these is a navigation menu with five tabs: '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)?* Yes No
- 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 questions is a section titled 'Employment History*' with a '+ Add Employment History' button.

NEW LICENSE – QUALIFICATIONS & EXPERIENCE

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- 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**.

| 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

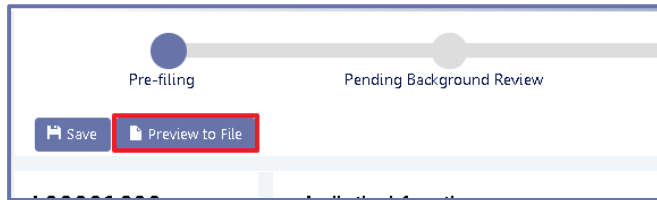
- Click the **Pay Now** button at the bottom of the toolbar on the right to pay the fee.
- Pay the amount **in full**. Partial payment is not an option.

The screenshot displays the 'NEW LICENSE – PAY FEE' application interface. 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. 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 includes 'Dashboard', 'Application Highlights', 'View Filing', 'Trace History', 'Payment History', and a red-bordered button labeled '\$600.00 Pay Now'.

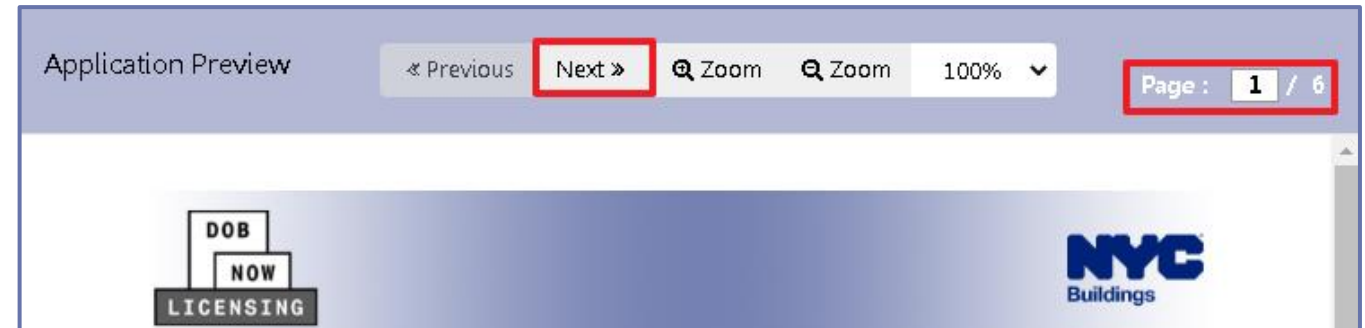
NEW LICENSE – FILE APPLICATION

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**.

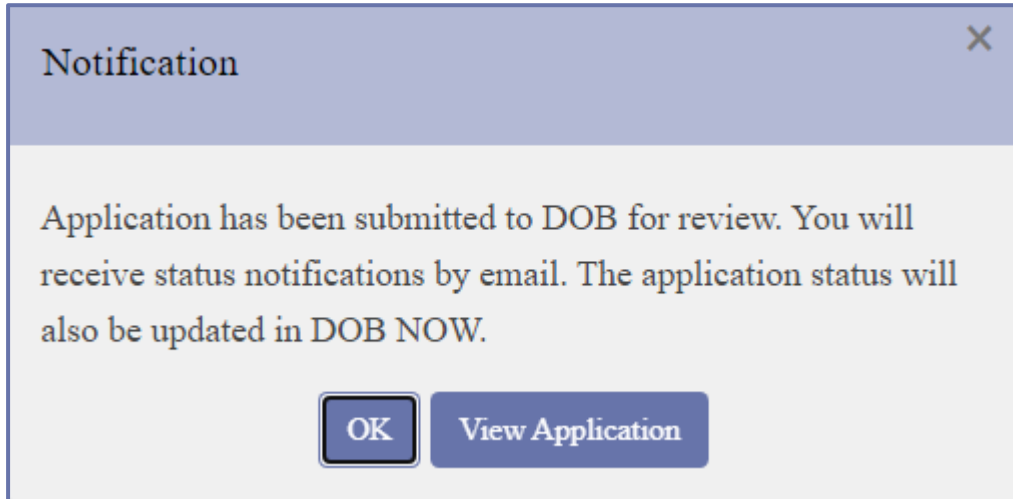


I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

Name Date
(Electronically Signed)

File

NEW LICENSE – APPLICATION FILED

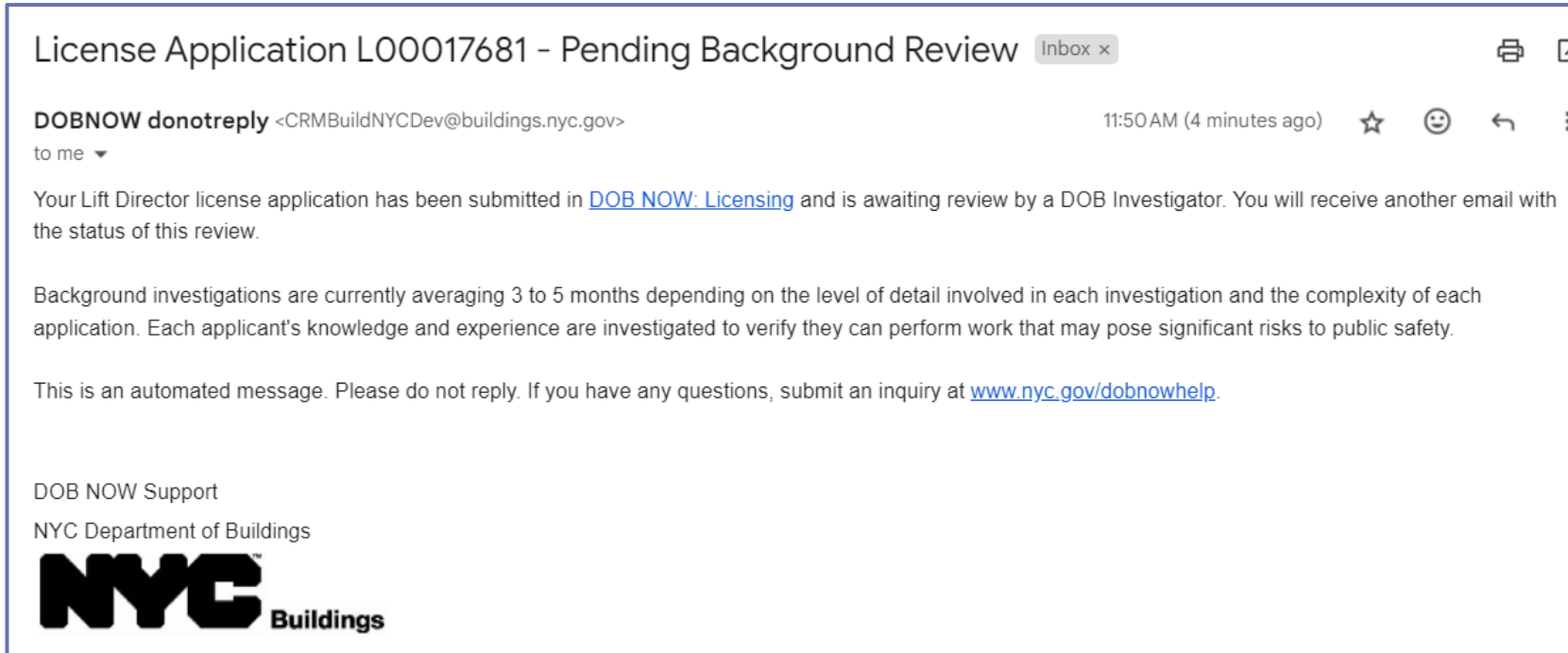


- Click **OK** on the Notification pop-up.

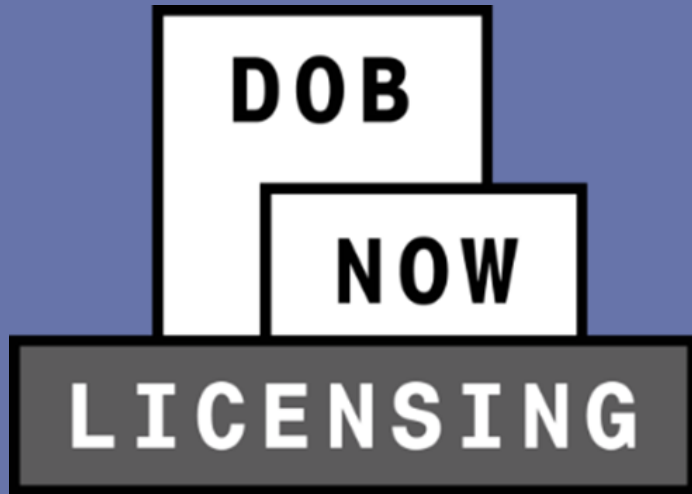
- The Status Bar will update to **Pending Background Review**.



NEW LICENSE – APPLICATION FILED



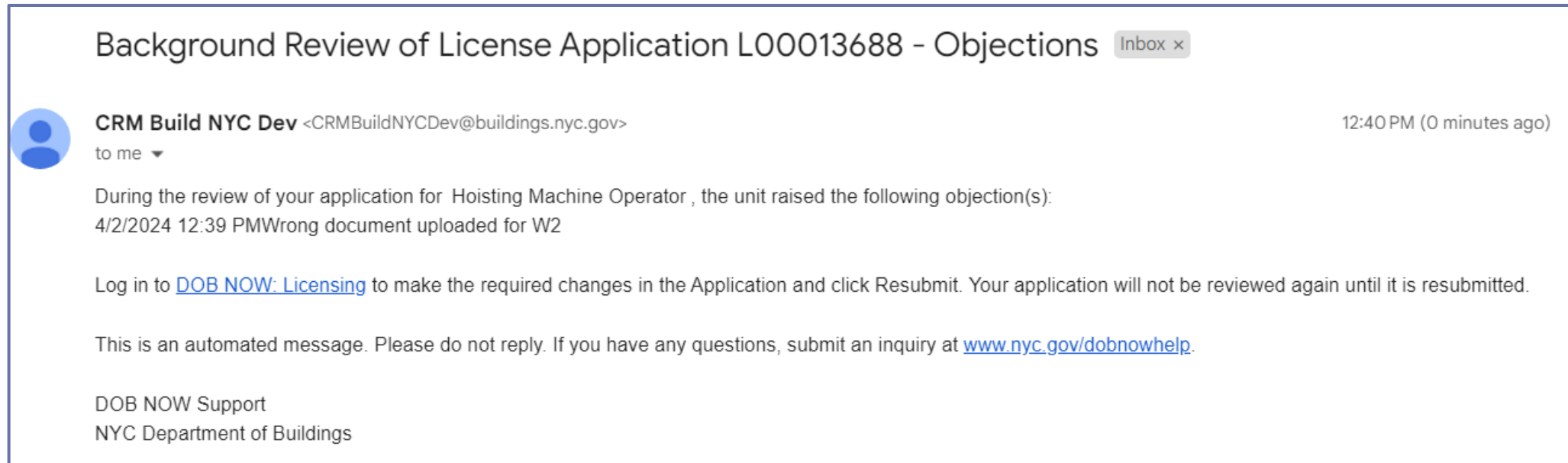
- You will receive an email that your license application has been submitted and is awaiting review.



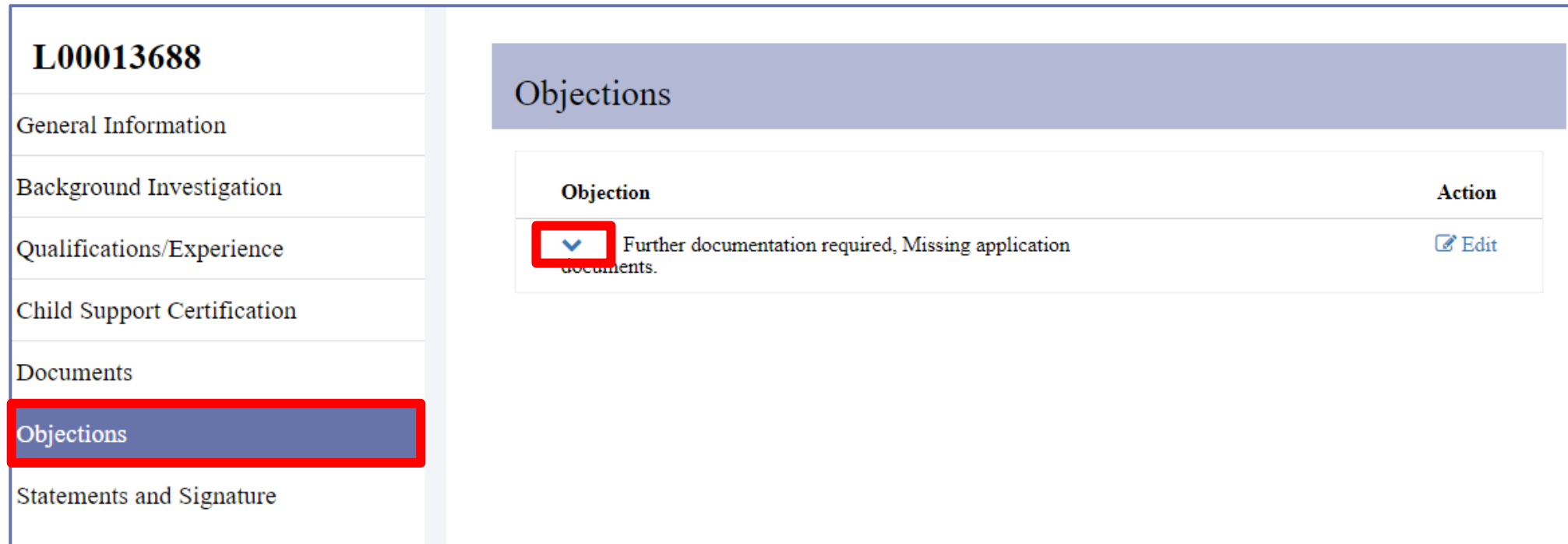
**RESPONDING TO OBJECTIONS OR
REQUESTING RECONSIDERATION**

- 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**.



- 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 interface for application ID **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 |  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: Select Action: Reconsider | L00016825 | New License | Hoisting Machine Operator | Limited License Boom Trucks | Denied |

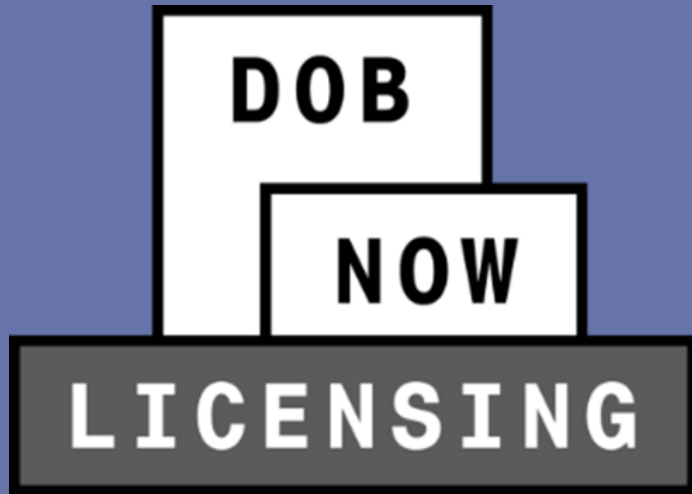
REQUESTING RECONSIDERATION

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 the application ID 'L00016312' and a menu with options: 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



GETTING THE LICENSE

The screenshot shows a web interface with a navigation bar at the top containing buttons for Home, New License, Manage My Profile, and Business Approval. Below this is a tabbed menu with 'My Applications', 'My Requests', 'Business Approval', and 'SSM Trainee Enrollment'. The 'My Applications' tab is active, displaying a table with the following columns: Application Number, Application Type, License Type, License Class/Class Type, Application Status, and Applicant of Record. Two application rows are visible. The first row has Application Number L00013688, Application Type New License, License Type Hoisting Machine Operator, License Class/Class Type Class A, and Applicant of Record HMO License. The Application Status for this row is 'Approval Letter Sent', which is highlighted with a red box. The second row has Application Number L00013661, Application Type New License, License Type Site Safety Professional, License Class/Class Type Construction Superintendent, and Applicant of Record HMO License. The Application Status for this row is 'License Card Issued'.

| 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 |

The screenshot shows a popup window titled 'Application Information' with a close button (X) in the top right corner. The window contains the following text: 'Application Number: L00013688', 'Application Type: New License', and 'License Type: Hoisting Machine Operator'. At the bottom of the window, there are two buttons: 'OK' and 'Cancel'. The 'OK' button is highlighted with a red box.

- 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.

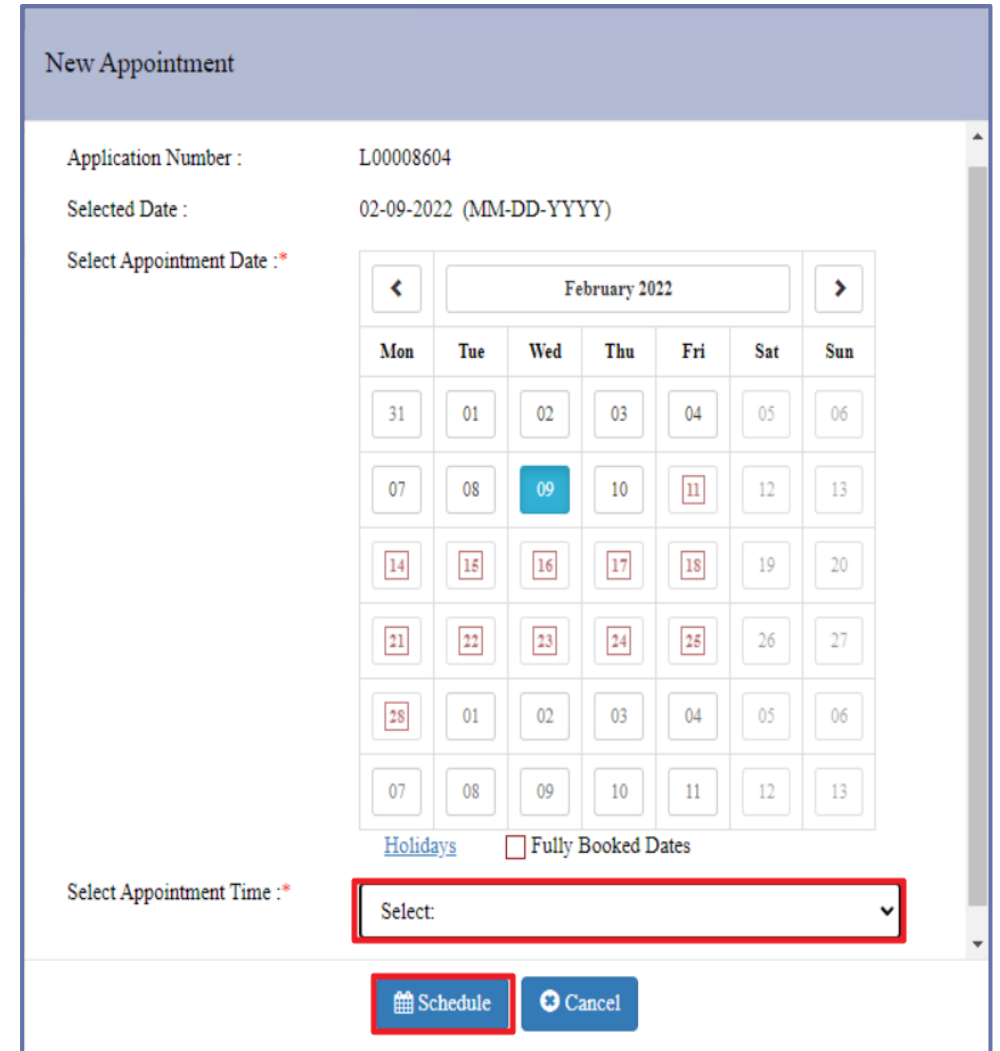
The screenshot displays a user interface for license L00008604. On the left is a vertical navigation menu with the following items: General Information, Background Investigation, Qualifications/Experience, Documents, Appointments (highlighted in blue), and Statements and Signature. The main content area 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".

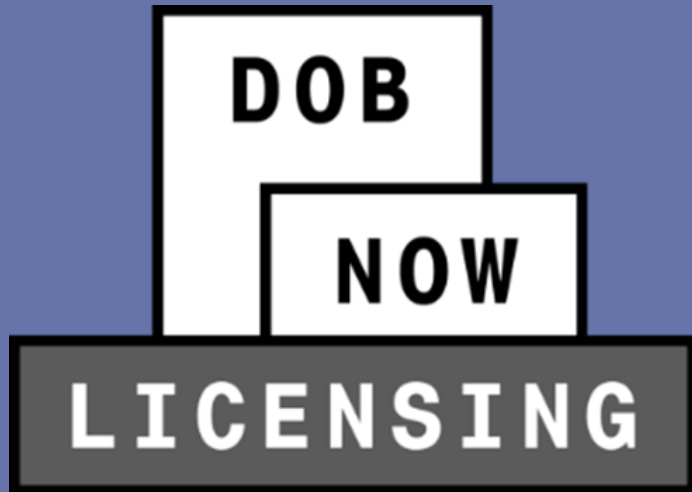
Select Appointment Time :*

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".

| 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 | |

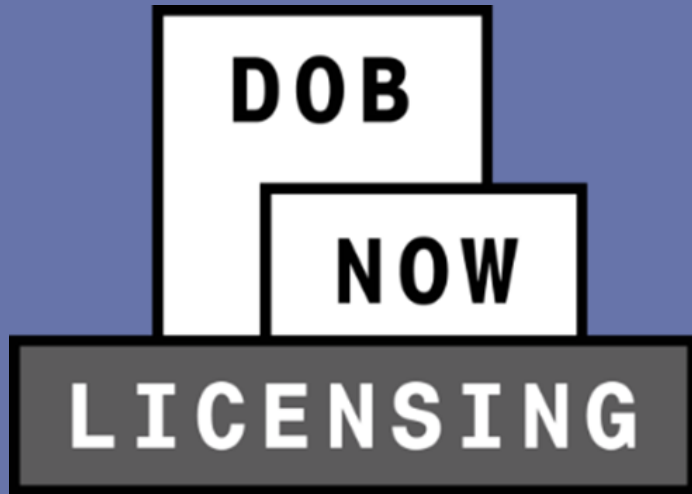
- The appointment details will be listed on the tab. If there is a need to cancel the appointment, it can be done from here.
- An email notification is sent confirming the appointment. The Licensing Unit is located at **280 Broadway, 1st Floor in Manhattan**. The applicant is required to attend the appointment;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



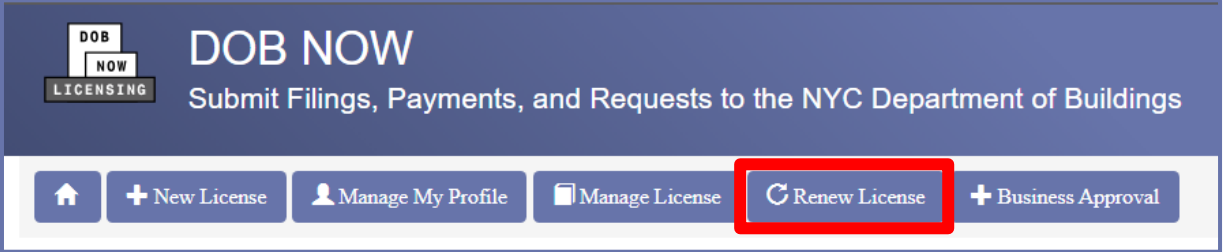
MANAGE LICENSES

Renew License

RENEW LICENSE – CREATE APPLICATION

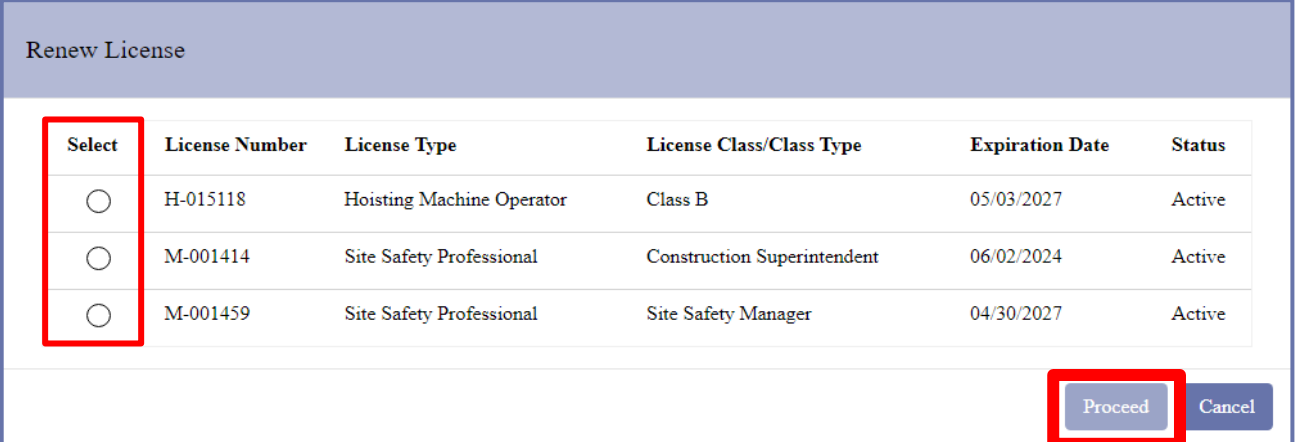
DOB
NOW

- 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**.



DOB NOW LICENSING Submit Filings, Payments, and Requests to the NYC Department of Buildings

Home + New License Manage My Profile Manage License **Renew License** + Business Approval



Renew License

| 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 |

Proceed Cancel

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

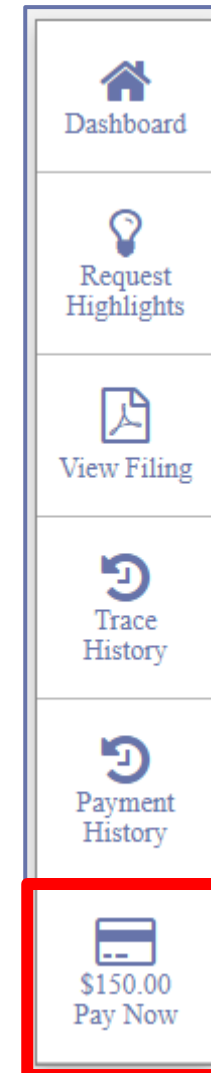
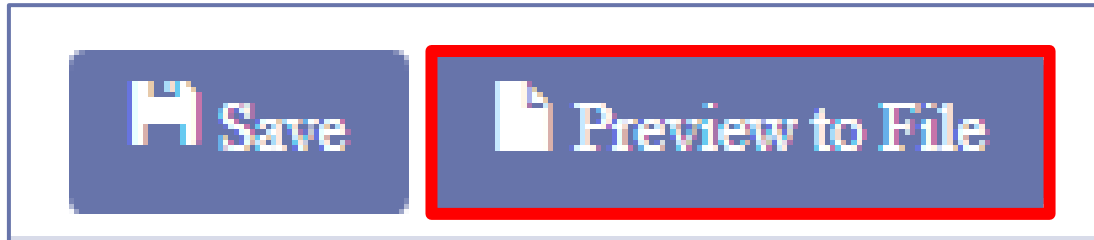
Documents

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

- 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**.

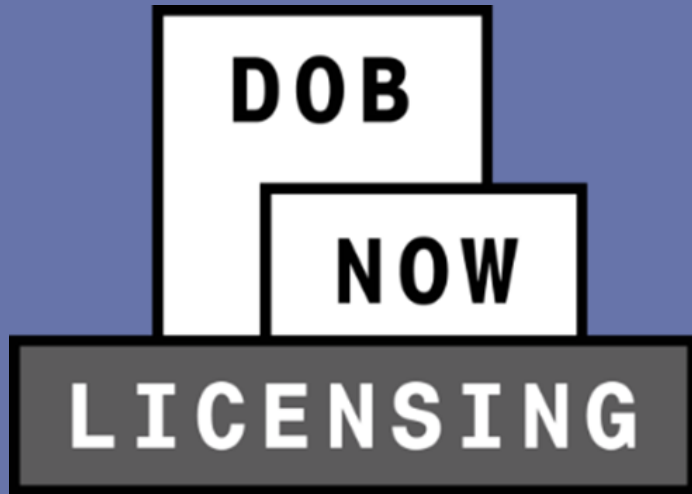


RENEW LICENSE – APPLICATION STATUS

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

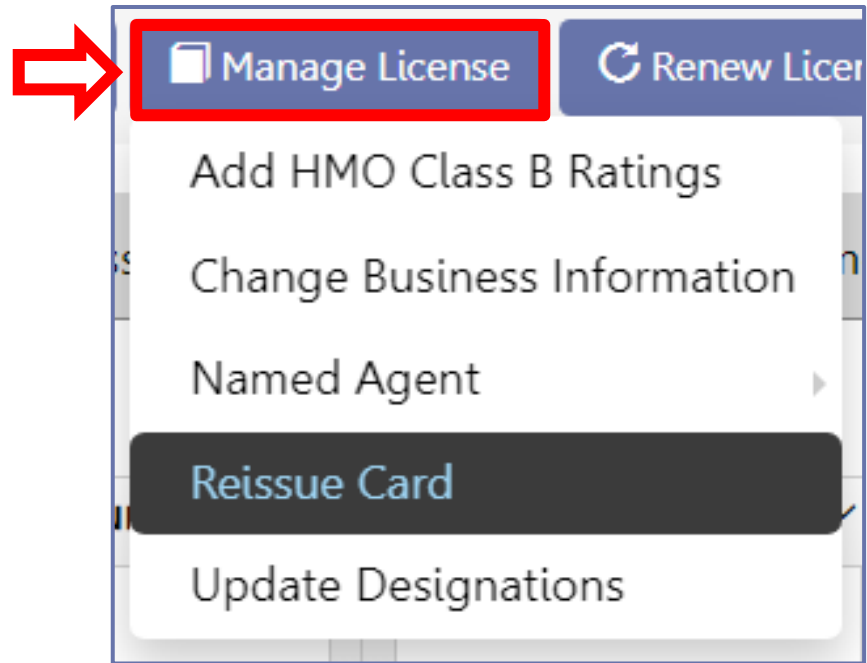


- The review process for a License Renewal is:
 - **Pre-Filing**
 - **Pending Background Review**
 - **Pending QA Review**
 - **Renewal Approved**
 - **Renewed License Card Issued**
- See the [Licensing Review Statuses](#) for a list and explanation of all Licensing application review statuses.
- Once 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

- 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

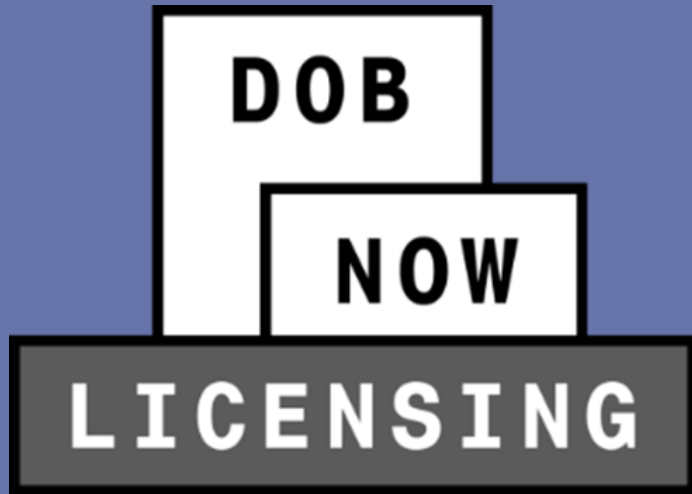
- Once the information on the General Information tab is saved, an **Application Number** will be generated.
- The process to complete the Reissue is the same as the steps in the Renewal process:
 - Fill in all new or updated information, upload any required documents and complete the attestation on 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 |

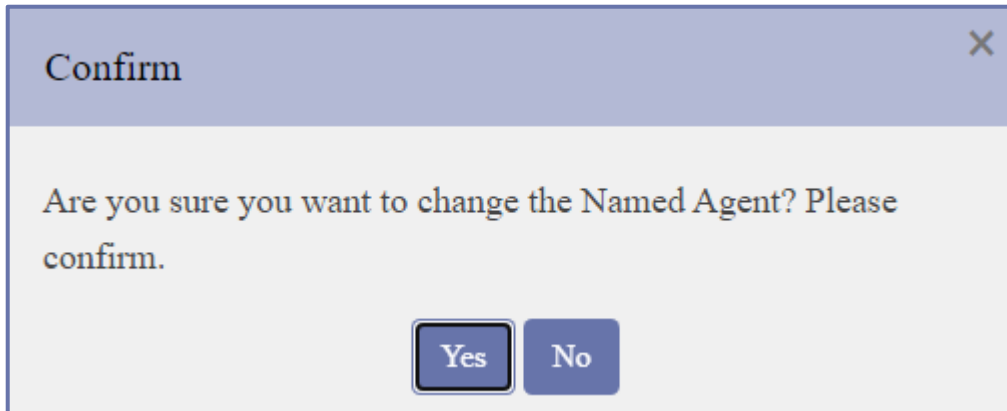
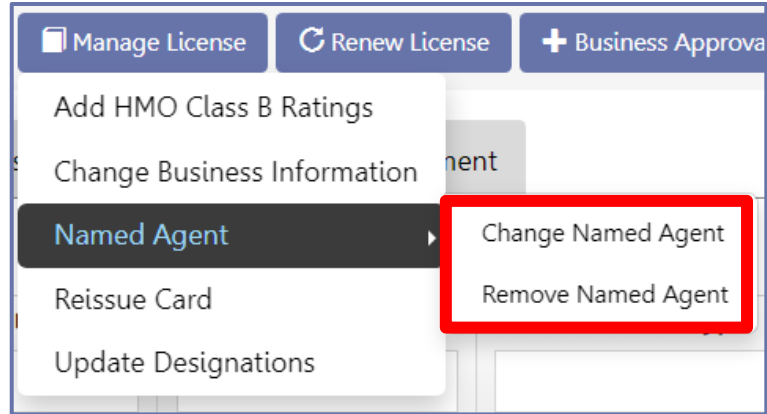


MANAGE LICENSES

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.

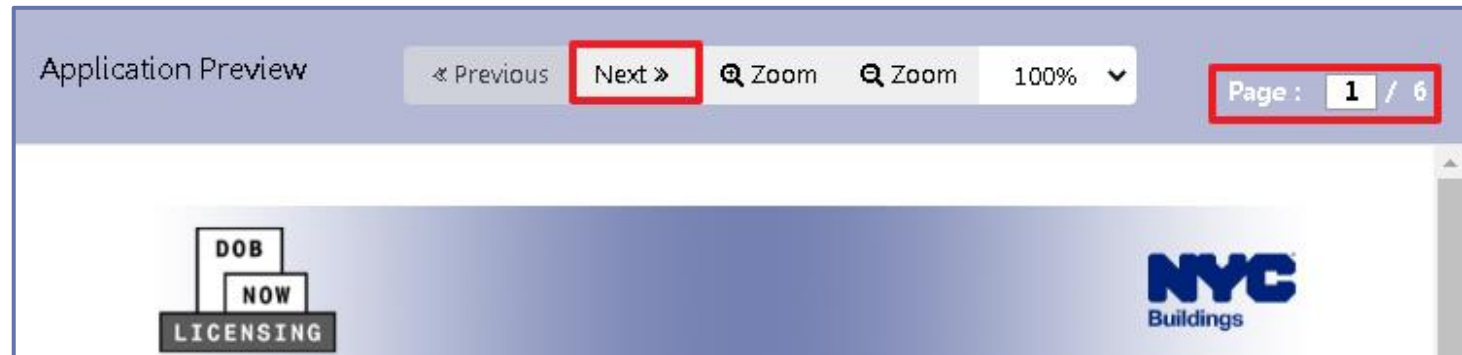


Save Preview to File

CR00001189

General Information

Statements & Signature



Application Preview

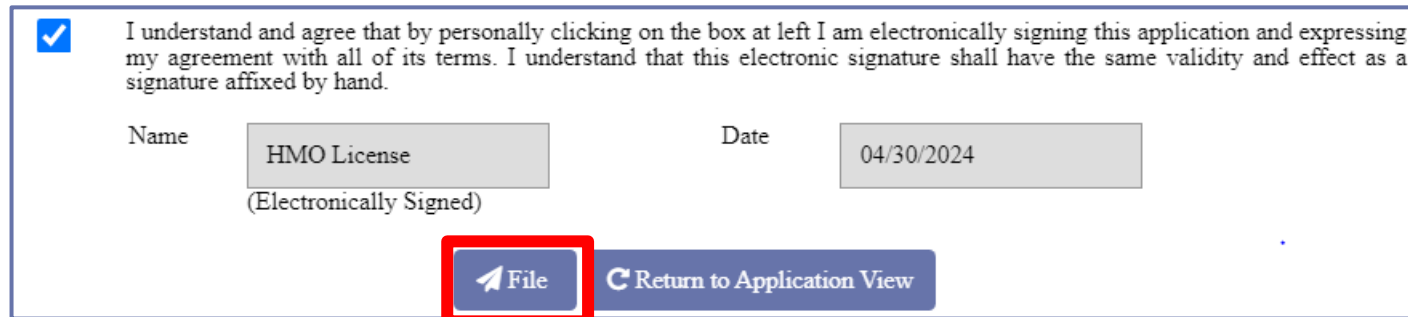
« Previous Next » 🔍 Zoom 🔍 Zoom 100% ▾

Page : 1 / 6

DOB
NOW
LICENSING

NYC
Buildings

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

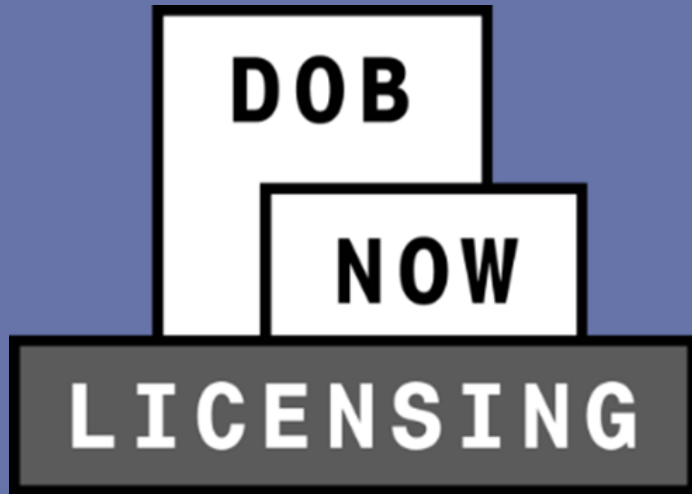


I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

Name Date

(Electronically Signed)

File Return to Application View



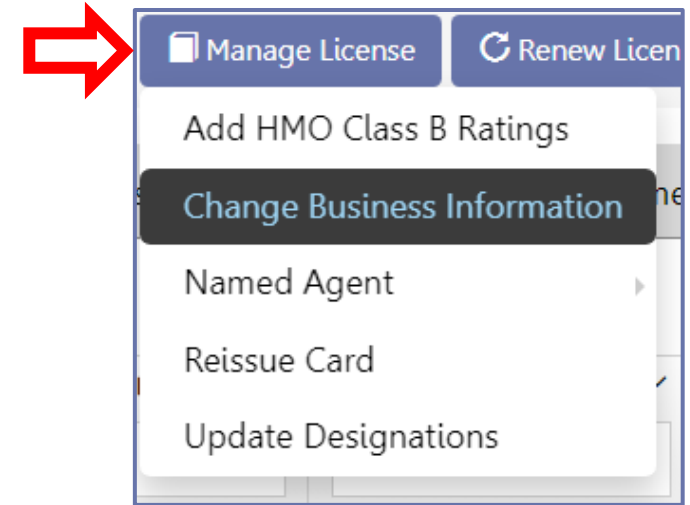
MANAGE LICENSES

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

- 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* <input type="text" value="Select Business Type"/> | Business Name* <input type="text"/> | Business Address* <input type="text"/> |
| City* <input type="text"/> | State* <input type="text" value="Select"/> | Zip* <input type="text"/> |
| Business Email* <input type="text" value="Enter email/username..."/> | Business Phone* <input type="text"/> | |










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.

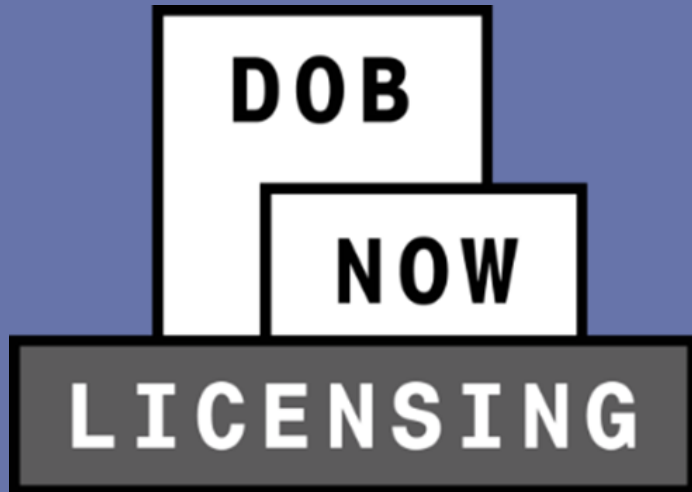
In the event of an accident that involves my actions undertaken in connection with my license/registration and/or qualification, I understand that the Administrative Code requires that I cooperate with any investigation and that failure to do so may result in immediate suspension, revocation or other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



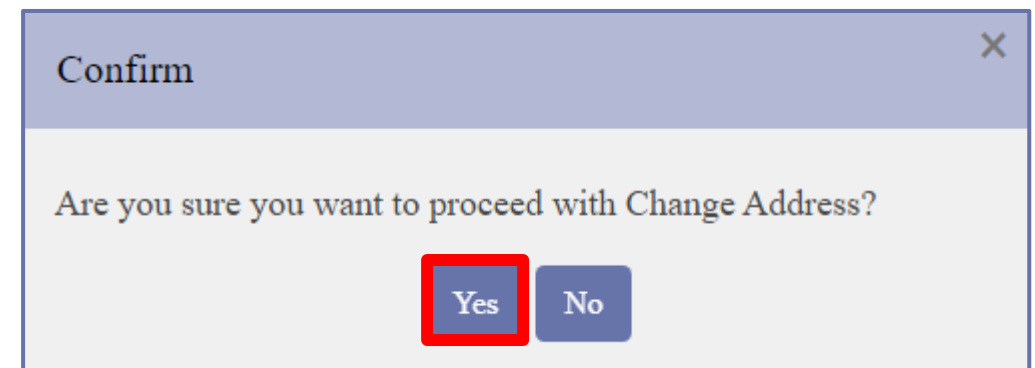
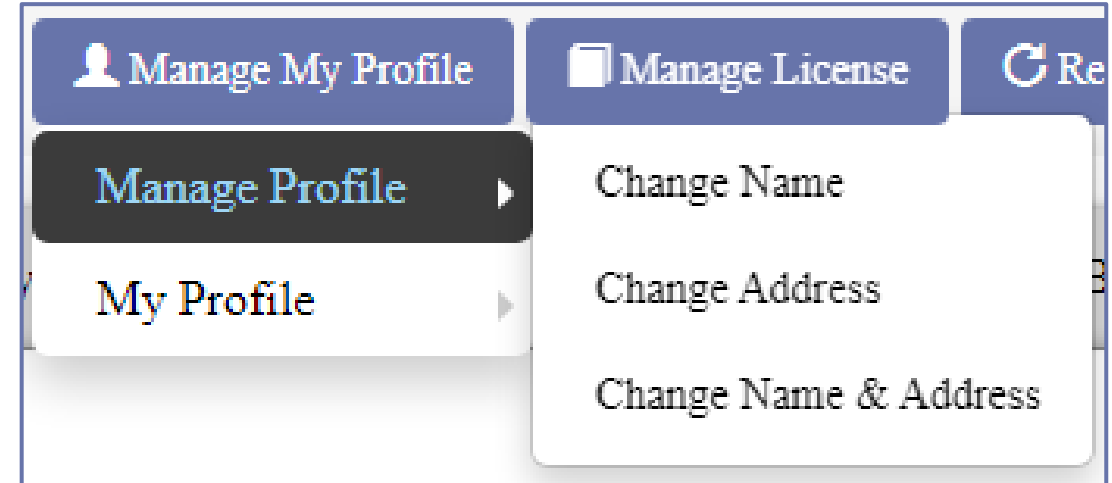
MANAGE PROFILE

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.

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

UPDATE LICENSE HOLDER INFORMATION – PAY FEE

DOB
NOW

Save Preview to File

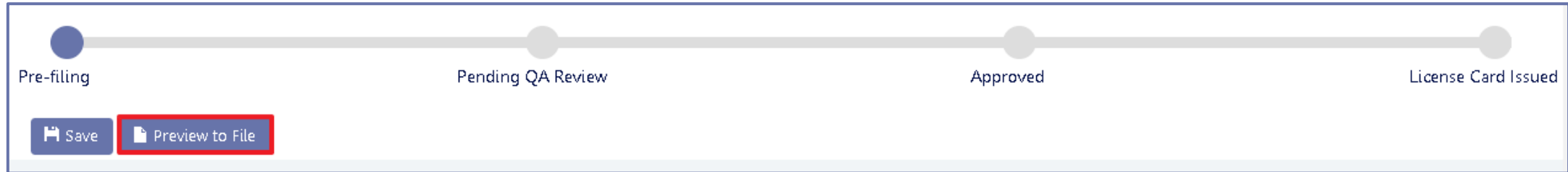
CR00000241

- **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.

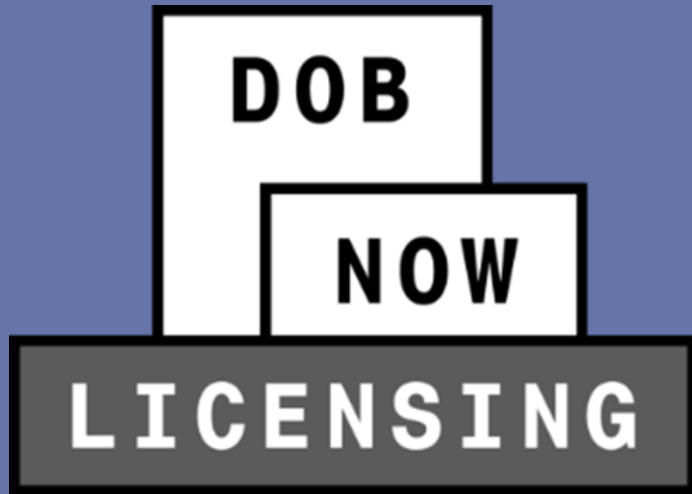
- Dashboard
- Request Highlights
- View Filing
- Trace History
- Payment History
- \$50.00 Pay Now**

UPDATE LICENSE HOLDER INFORMATION

DOB
NOW

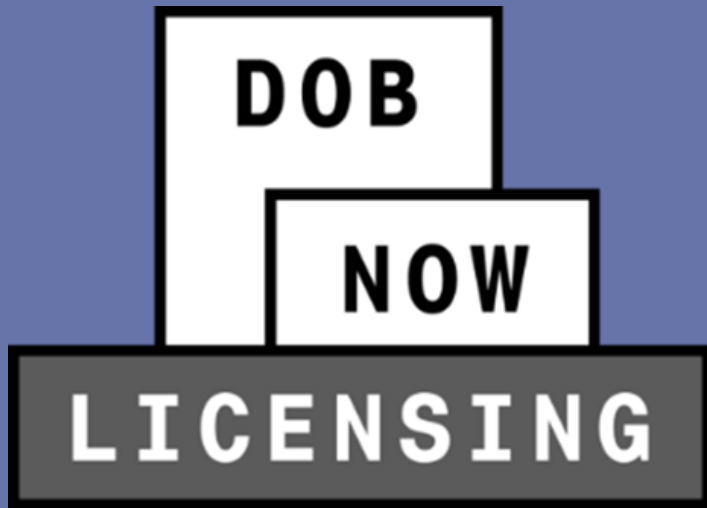


- Click **Preview to File** to submit the Request.
- If acceptable, **check the box** to attest on the final page.
- Click **File** to submit the request.
- Once the Licensing Unit has **Approved** the request, the applicant will receive an email notification and the new License Card in the mail within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



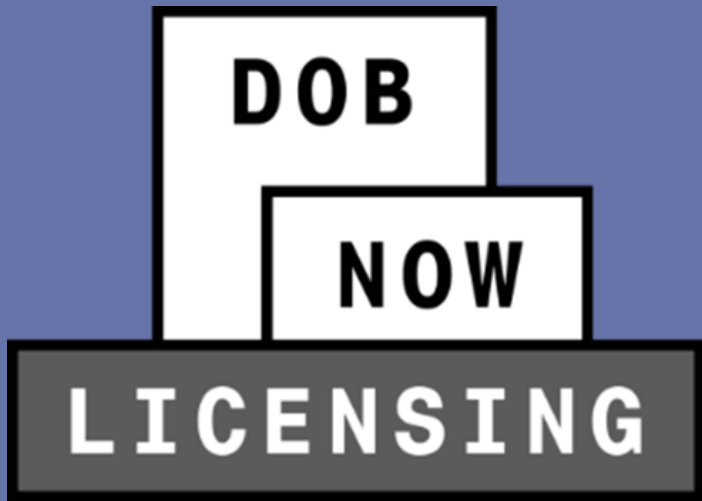
IMPORTANT NOTES

- 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?