

CRANES & DERRICKS

STEP-BY-STEP GUIDE: cn applications for self erecting

- The following Step-by-Step Guide will outline the steps applicable to Self-Erecting Tower Cranes within DOB NOW: *Build*.
- The examples shown and used in this Step-by-Step Guide are specific to Self-Erecting Tower Cranes only.



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Guidelines

Crane Notice Number (CN NUMBER)

When a specific job requires the use of a crane, a Crane Notice Number (CN NUMBER) must be obtained (Except for certain Criteria where an Onsite waiver can be applied depending upon job type) by the job's Professional Engineer in order for the crane to be put into use at the site. Only the PE can file for a CN Number. The system will issue a CN Number upon save of an application. The CN and Status is displayed on the portal's Application Highlights.

Only if certain parameters of these devices fall within a certain range then CN numbers are not required

A CN number is unique to a location. A single CD number can have one or many associated CN numbers, but a CN number can only be associated with a single CD number (except for Dual Mast Climbers).

- These CN applications can be reviewed and approved by DOB, resulting in multiple approved CN applications on the same location.
- This business rule shall apply to all device types mentioned in this document.

The Professional Engineer may need to come back to the CN step of 'Assign CD Number to the CN' at any point in the CN process, to accommodate unique scenarios; for example: the crane at the site breaks or the contract for one crane expires and a new crane must be brought in. For phase 1, this will be handled by IT via the backend. The C&D Unit will coordinate with IT to accommodate this.

A CN fee must be paid annually (every 12 months) for as long as the CN is active.

- If 12 months elapses without the fee being paid, the status of the CN will change from 'Active' to 'Inactive'. It will remain in this status of 'Inactive' for a period of 30 days during which time the fee can be paid to renew the CN.
- If the fee is not paid after the 30-day period, the status of the CN will change to expired.
- A CN can be renewed any time during the status of Active or Inactive. The updated expiration date will be based on the Anniversary Date.
- If the applicant pays by e-check, then a No-Good Check Verification is performed. If the e-check bounces, a bounced check fee is applied, and the full fee must be paid in order to move forward. The anniversary date is still the original file date.

After the CN application is reviewed and approved by DOB, the Professional Engineer can then assign the CD (i.e. the actual device) to the CN (the physical location). For a CD to be assigned to a CN, the CD must be active (and accepted/approved). For Tower Cranes the system must only allow a CD to be assigned to one CN at a time. However, for other crane types such as Mobile Cranes, Dedicated Pile Drivers and Self Erecting Tower cranes, a CD can be assigned to multiple CN's.

Initial CN: The numbering format for initial Crane Notice will start with "CN" + 8 digits (where the ending two digits are the year that the CN is initially filed in and the digits immediately before that are the next sequentially available number). At the start of each new year, the numbering scheme resets at 1 (e.g. the very first CN that is filed in the year 2021 will have several: CN00000121). **Example CN:** CN00103619

CN Amendment: The numbering format for CN Amendment will start with "-A"+ 6 digits to the CN number, starting at "000001" for each CN number and increasing sequentially for each subsequent Amendment on the given CN. **Example**: CN00103519-A000001

CN Renewal: The numbering format for CN renewal will start with "-R"+ 6 digits to the CN number, starting at "000001" for each CN number and increasing sequentially for each subsequent Renewal on the given CN. **Example**: CN00103519-R000001

For Mobile cranes, Self- Erecting tower cranes, Dedicated Pile Driver and Derricks if user answer "No" to Assembly/Disassembly required for Initial Phase. Then system will not allow the user to identify A/D Director. If answer to the above question "Yes" then this is required step.

ROLES & RESPONSIBILITIES

- 1. Only the Professional Engineer (PE) can file for a Crane Notice (CN) Number.
- 2. The system will issue a CN Number upon submission of an application.
- 3. The CN and Status is displayed on the portals Application Highlights.
- 4. Only if certain parameters of these devices fall within a certain range then CN numbers are not required.
- 5. A CN number is unique to a location.
- 6. A single CD number can have one or many associated CN numbers, but a CN number can only be associated with a single CD number.
- 7. Only one Device Installer and one Lift Director can be assigned to a CN at a time.

8. Up to 10 Hoist Machine Operator's (HMO) can be assigned at one time. For an HMO to be added to a CN, the system their license must be Active.

For FILING REPRESENTATIVES only

- 1. The Filing Representative Contact persons must be different from the Applicant of Record, Engineer and Manufacturer.
- 2. Two Filing Representatives are allowed for each application.
- 3. A Filing Representative can add another Filing Representative in an application.
- 4. Filing Representatives cannot be Applicants of Record (i.e. they cannot submit filings). However, they can perform data-entry functions to provide equipment information and upload documents.
- 5. Filing Representatives cannot edit Manufacturer or Engineer information and cannot attest.

SYSTEM GUIDELINES

- 1. Greyed-out fields are Read-Only or are auto-populated by the system.
- 2. Fields with a red asterisk (*) are required and must be completed.

ADDITIONAL HELP & INFORMATION

- 1. Video Tutorials: DOB NOW YouTube Channel
- 2. Presentations & Sessions: nyc.gov/dobnowinfo



In these Step-by-Step Guides, you will learn how to:

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|---|-----|
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Log into DOB NOW

Complete the following steps to log into DOB NOW:

| Step | Action |
|-------|--|
| Note: | In order to log into DOB NOW, the user must be registered for eFiling. |
| | Additionally, DOB recommends turning off pop-up blockers to successfully navigate within DOB NOW. |
| | For Step-by-Step instructions, please submit a question to www.nyc.gov/dobnowhelp or refer to the following links: |
| | How to Register for eFiling: |
| | https://www1.nyc.gov/assets/Buildings/pdf/registration_tip_owners.pdf |
| | How to Turn Off Pop-up Blockers: |
| | https://www1.nyc.gov/assets/Buildings/pdf/allow_pop-up_blockers.pdf |
| 1. | Access the Internet. |
| 1. | |
| 2. | Enter <u>www.nyc.gov/dobnow</u> in the URL field at the top of the browser window. |
| 3. | New Tab × + □ ∅ ⊠ ← → C □ www.nyc.gov/dobnow ⓒ □ 1 : |
| | Press Enter on the keyboard. |



| | Step | Action |
|----|------|---|
| | | The DOB Login page displays. Enter Email and Password (as registered in eFiling). |
| 4. | | Submit Filings, Payments, and Requests to the NVC Department of Buildings Submit Signs, Payments, and Requests to the NVC Department of Buildings |
| | | Search the Public Portal for Filings and Permits Submitted in Log In to Address Enter your eFiling or DOB NOW: Licensing account information Email Image: Comparison of the submit submitted in |
| | | Building Identification Number (BIN) Password Borough, Block, Lot Login Device Search To use DOB NOW. Build or Safety, register for an effing account here. To rest your effing password. dick here. |
| | | Licensees Search Need more help? Contact us. |
| 5. | | Click Login. Enter your eFiling or DOB NOW: Licensing account information |
| | | Email Email Password |
| | | Password Login |
| | | To use DOB NOW: Build or Safety, register for an eFiling account here. To reset your eFiling password, click here. Welder, Journeyman and Gas Work: Qualification Applicants only – click here to create a new DOB NOW: Licensing profile. To change your DOB NOW profile password, click here. |
| | | Need more help? Contact us. |



| | Step | Action |
|----|------|---|
| | | The DOB NOW Welcome page displays. |
| | | Hover the cursor over DOB NOW: Build. |
| | | DOB DOB NOW Welcome, ADAM JOE2 NOW Submit Filings, Payments, and Requests to the NYC Department of Buildings Welcome, ADAM JOE2 Need Help? Need Help? |
| 6. | | Welcome! DOB NOW provides robust online accounts, making it easier to submit applications, make payments, schedule appointments, check the status of an application or inspection, pull permits, and make renewals. |
| | | Façade, Boiler Compliance Filings are available under DOB NOW: Safety. |
| | | Plumbing: Sprinkler, Standpipe, Antenna, Curb Cut, Sidewalk Shed, Supported Scaffold, Fence, Sign, Electrical and Elevator Job Filings are available under DOB NOW: Build . |
| | | Get started by selecting a component below. |
| | | DOB NOW BUILD SAFETY |
| _ | | Select Cranes from the drop-down list. |
| 8. | | DOB NOW BUILD Cranes DOB NOW SAFETY |
| 0. | | The DOB NOW Dashboard displays. |
| | | The Prototypes tab displays by default and displays all Prototype Certificate of Approval Applications associated with an eFiling account. |
| | | ↑ Prototype ↓ Grane Notice ↓ Grane Waiver ↓ Master Rigger Notification ↓ AHV Permit |
| | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search |
| | | Job Number Filing Type Filing Status Crane Type Prototype Number Applicant Payment Status Modified Date Actions Filter Filte |
| | | You are now logged into DOB NOW: <i>Build</i> . Continue to the next section. |



Self-Erecting Tower Crane CN: Initiate a Crane Notice Application

Complete the following steps to initiate Crane Notice Application:

| | Step | Action |
|----|------|--|
| | APPL | ICANT OF RECORD: OWNER |
| 1 | | Hover the cursor over +Crane Notice and select New Crane Notice from the drop-down list. |
| 1. | | DOB NOW BUILD DOB NOW Submit Filings, Payments, and Requests to the NYC Department of Buildings |
| | | + Prototype + Crane D + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Pe |
| | | All Crane Types Prototype Crane Device Crane N New Crane Notice 2 Onsite Waiver Master Rigger Notifi |
| | | Amendment |
| | | Renewal Job Number V Filing Status V Crane Ty |
| | | Filter Tower Crane Filter |
| | | CP00001830 New Tower Crane Foundation A Assignment Mobile Crane |
| | | CP00001828 Tower Crane, Mast Climber Mobile Crane |
| 2. | | Provide Disassembly Details Provide Disassembly Details New Provide Disassembly Details New Provide Disassembly Details |
| | | A New Crane Notice pop-up window displays with Crane Device options: Select the applicable Crane Device (e.g., Self-Erecting Tower Crane) and click Submit to proceed. New Crane Notice |
| | | |
| | | Dedicated Pile Driver Derrick Mast Climber Self Erecting Tower Crane |
| | | Mobile Crane Tower Crane |
| | | 2 Submit Cancel |

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| Step | Action |
|------|--|
| | You have begun the process for a Crane Notice. |
| | Continue to the Complete General Information tab section. |



Complete General Information

Complete the following steps to complete the General Information tab to associate the Stakeholders

(e.g. Filing Representatives, Manufacturers etc.) to the application:

| Step | Action |
|------|--|
| | The General Information section displays. |
| | General Information |
| | General Information Filing Information Crane Notice Type* Filing Type* Crane Type* Crane Notice New Select Crane Type: |
| | The Filing Information fields: Crane Notice Type, Filing Type and Crane Type are greyed- out and cannot be edited. |
| | General Information |
| | Filing Information Crane Notice Type* Filing Type* Crane Notice |
| | Enter the Location Information: House Number Street Name |
| | Select the Borough from the Borough drop-down list (e.g., Staten Island) Block Lot |
| | |
| | Select the Owner Type (e.g., Individual) from the Owner Type drop-down list. |
| | Associated BIS/DOB NOW Job Number (Max 5) |
| | Associated BIS/DOB NOW Job Number (Max 5) The BIN field is greyed-out and Read-Only. Location Information House Number* Borough* |
| | Associated BIS/DOB NOW Job Number (Max 5) The BIN field is greyed-out and Read-Only. |



| Step | Action | | |
|------|--|---|---|
| | Enter the Applicant Info | rmation: | |
| | Type the Email of | and then select the Email Add | dress from the blue drop-down |
| | | | n the License Type drop-down list |
| | | ess Name from the Business | |
| | Applicant Information | | |
| | Email* Enter email/username | Last Name | First Name |
| | License Type* | License Number | Business Name* |
| | Select: | Y | Select: |
| | Business Address | City | State |
| | Zip Code | Business Telephone | Mobile Telephone |
| | | | |
| | | | |
| | Select the Licens | and then select the Email Add se Type (e.g., Individual) from | dress from the blue drop-down n the License Type drop-down list |
| i. | Type the Email of Select the Licens Select the Busin (click + Add New | and then select the Email Add | n the License Type drop-down list Name drop-down list |
| | Type the Email of Select the Licen s Select the Busin | and then select the Email Add se Type (e.g., Individual) from ess Name from the Business | n the License Type drop-down list Name drop-down list |
| | Type the Email of Select the Licens Select the Busin (click + Add Nev | and then select the Email Add se Type (e.g., Individual) from ess Name from the Business v if the Business Name is not | n the License Type drop-down list Name drop-down list listed) |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* | and then select the Email Add se Type (e.g., Individual) from ess Name from the Business v if the Business Name is not | n the License Type drop-down list Name drop-down list listed) |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* Select: | and then select the Email Add se Type (e.g., Individual) from tess Name from the Business or if the Business Name is not | n the License Type drop-down list Name drop-down list listed) First Name Business Name* |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* | and then select the Email Add se Type (e.g., Individual) from tess Name from the Business or if the Business Name is not | n the License Type drop-down list Name drop-down list listed) |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* Select: | and then select the Email Add se Type (e.g., Individual) from tess Name from the Business or if the Business Name is not | n the License Type drop-down list Name drop-down list listed) First Name Business Name* |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* Select: Business Address | and then select the Email Add se Type (e.g., Individual) from tess Name from the Business or if the Business Name is not | n the License Type drop-down list Name drop-down list listed) First Name Business Name* Select: State |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* Select: Business Address | and then select the Email Add se Type (e.g., Individual) from tess Name from the Business or if the Business Name is not | n the License Type drop-down list Name drop-down list listed) First Name Business Name* Select: State |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* Select: Business Address Zip Code | and then select the Email Add se Type (e.g., Individual) from tess Name from the Business or if the Business Name is not | n the License Type drop-down list Name drop-down list listed) First Name Business Name* Select: State Mobile Telephone |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* Select: Business Address Zip Code | and then select the Email Add se Type (e.g., Individual) from thess Name from the Business or if the Business Name is not Last Name License Number City Business Telephone | n the License Type drop-down list Name drop-down list listed) First Name Business Name* Select: State Mobile Telephone |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* Select: Business Address Zip Code | and then select the Email Add se Type (e.g., Individual) from thess Name from the Business or if the Business Name is not Last Name License Number City Business Telephone | n the License Type drop-down list Name drop-down list listed) First Name Business Name* Select: State Mobile Telephone |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* Select: Business Address Zip Code | and then select the Email Add se Type (e.g., Individual) from thess Name from the Business or if the Business Name is not Last Name License Number City Business Telephone | n the License Type drop-down list Name drop-down list listed) First Name Business Name* Select: State Mobile Telephone |
| | Type the Email of Select the Licens Select the Busin (click + Add New Equipment User's Information Email* Enter email/Username License Type* Select: Business Address Zip Code If applicable, click + Add Filling Representative Information | and then select the Email Add se Type (e.g., Individual) from thess Name from the Business or if the Business Name is not Last Name License Number City Business Telephone | n the License Type drop-down list Name drop-down list listed) First Name Business Name* Select: State Mobile Telephone |



| | Step | Action | | |
|----|-------|--|--|--|
| | | The Filing Representative Details pop-up window displays. Type the Email and then select the Email Address from the blue drop-down. | | |
| 7. | | Filing Representative Details | | |
| | | Email* Last Name First Name APPLEROME16@GMAIL.COM Business Address City | | |
| | | State Zip Code Country Select: | | |
| | | | | |
| - | | Click Save. | | |
| 3. | | Business Telephone (458) 466-4485 | | |
| | | Save Save | | |
| - | Note: | The Filing Representative added displays within the Filing Resprentative information table. | | |
| | | Click the edit (${}^{\frown}$) icon to update the information. | | |
| | | Click the trash can ($$) icon to delete the Filing Representative. | | |
| | | Filing Representative Information Add Representative | | |
| | | First Name Last Name Email Business Name Business Telephone Action ADDLE ROME ADDLEROWITS GOMAIL COM ROME LLC (453) 465 4495 Com Com | | |
| | | APPLE ROME APPLEROME16@GMAIL.COM ROME LLC (458) 466-4485 | | |



| Step | Action |
|------|---|
| | At the top-left of the screen, click Save . |
| | F Save General Information |
| | General Information Filing Information Crane Notice Type* Crane Notice |
| | A Notification pop-up window displays with the message: |
| | The following information cannot be changed after saving: Filing Information Location Information. Click Save to continue. |
| | Notification |
| | The following information cannot be changed after saving: • Filing Information • Location Information |
| | Save |
| | A Notification pop-up window displays with the message: |
| | Job filing has been saved. |
| | Click OK to continue. |
| | Notification × |
| | Job filing has been saved. |
| | Step |



| Action | | |
|--|--|--|
| The General Information section displays an additional field, Additional Contact Information. | | |
| If applicble, click the +Add Additional Contact to add an additional contact. | | |
| Additional Contact Information + Add Additional Contact Contact Type First Name Last Name Email Business Name Edit Delete | | |
| The page refreshes and displays the additional items: | | |
| 1. Status Bar | | |
| 2. Review and File | | |
| 3. Crane Notice Filing Number | | |
| Additional Tabs: Prototype & Phase Information, Document and Statements & Signatures | | |
| 5. Application Information : Application Highlights, View Filing, History and Fee | | |
| Pre-filing Pending QA Assignment Pending QA Admin Review Pending PE Assignment PE Review in Process Approved | | |
| CN00033820 General Information | | |
| General Information Filing Information Prototype & Phase Information Crane Notice Type* Crane Type* Crane Type* Documents Location Information Location Information | | |
| Statements & Signatures House Number* Street Name* Borough* 280 BROADWAY MANHATTAN \$\$25000 Pay Now Block* Lot* BIN* 153 1 1079215 | | |
| You have completed the Complete General Information tab. | | |
| Continue to the next section. | | |
| | | |



Complete Prototype & Phase Tab

Complete the following steps to complete the **Prototype & Phase Information** tab for the application:

| | Step | Action | |
|----|------|-------------------------------|---|
| | | Click Prototype & Phase | e Information to display the Prototype & Phase Information section. |
| | | CN00023319 | Prototype & Phase Information |
| 1. | | General Information | Prototype Search |
| | | Prototype & Phase Information | Search by:* Prototype Number |
| | | Documents | Prototype Number* |
| | | Statements & Signatures | Q Search & Add |
| | | | |
| | | Select the applicable Se | arch by (e.g. Prototype Number) radio-button in Prototype Search. |
| 2. | | A maximum of 2 Prototy | pes can be added per application. |
| | | CN00023319 | Prototype & Phase Information |
| | | General Information | |
| | | Prototype & Phase Information | Search by:* O Crane Type |
| | | Documents | Prototype Number* |
| | | Statements & Signatures | Q Search & Add |
| | | | |



| Step | Action | | | | | |
|-------|---|--|--|--|--|--|
| Note: | To search by Prototype Number : Enter the Prototype Number in the Prototype Number field. | | | | | |
| | Prototype Search Search by:* Prototype Number* Q Search & Add | | | | | |
| | To search by Crane Type : Select the Crane Type from the Crane Type drop-down list. | | | | | |
| | Search by:* O Prototype Number O Crane Type Crane Type* Self Erecting Tower Crane Q Search & Add Q Search & Add Add Add O Prototype Number O Prototype Number O Prototype Number O Prototype Number O Prototype Number O Prototype Number O Prototype Number O Prototype Number O Prototype Number | | | | | |
| | Prototype Information (Max 2) | | | | | |
| | Click Search & Add to proceed. | | | | | |
| | General Information Prototype Search Search by:* Prototype Number Crane Type | | | | | |
| | Prototype Number* CP00001605 Q Search & Add | | | | | |



| | Step | Action | | | | | | |
|----|------|-----------------|--------------------------------|-----------------------------------|-------------------------------|-----------------------|---|--|
| | | If applica | | -up window displand | | | | |
| 1. | l | | ults for Self Erecting To | wer Crane | | | | |
| | I | Selected | : CP00001850 | | Filter Search | h Results From Here | Q | |
| | l | ۲ | Prototype Number CP00001850 | Prototype Status Full Approval | Model (Month/Year) 10/2013 | Manufacturer Braun | ~ | |
| | l | 0 | Prototype Number CP00001844 | Prototype Status Full Approval | Model (Month/Year) 11/2014 | Manufacturer hello | ~ | |
| | l | 0 | Prototype Number P524 | Prototype Status | Model (Month/Year) 1/2005 | Manufacturer | ~ | |
| | l | 0 | Prototype Number P641 | Prototype Status | Model (Month/Year) 1/2009 | Manufacturer | ~ | |
| | l | 0 | Prototype Number P640 | Prototype Status | Model (Month/Year) 1/2009 | Manufacturer | ~ | |
| | l | 1 to 5 | of 123 records | + Add | 8 Cancel | | | |
| 5. | | A Notific | ation pop-up w | indow displays w | ith the message | : | | |
| | 1 | Prototyp | e has been add | ed. | | | | |
| | 1 | Click OK | to proceed. | | | | | |
| | l | Notifica | ation | | | × | | |
| | l | Prototy | vpe has been ac | lded. | | | | |
| | l | | | ОК | | | | |



| | Action | | | | | |
|-------|---|--|--|--|--|--|
| Note: | The Prototype added, displays within the Prototype Information. | | | | | |
| | Click the details (Details) icon to view the Prototype Information. Click the trash can (Delete) icon to delete the Prototype Number. | | | | | |
| | | | | | | |
| | Prototype & Phase Information | | | | | |
| | Prototype Search Search by:* O Prototype Number © Crane Type* Self Erecting Tower Crane V Q Search & Add | | | | | |
| | Prototype Information (Max 2) Prototype Number Crane Type Review Status Maximum Boom Maximum Jib Total | | | | | |
| | Prototype Number Crane Type Review Status Maximum Boom Maximum Jib Total CP00001850 Self-Erecting Tower Pre-filing 5 Feet 5 Feet 15 Feet Delate Details | | | | | |
| | Select the number of phases from the drop-down list labeled <i>"How many phases are you planning for this job?"</i> | | | | | |
| | Phases Information How many phases are you planning for this job?* | | | | | |
| | | | | | | |
| | Complete the Initial Phase and Initial Jump Information: | | | | | |
| | Complete the Initial Phase and Initial Jump Information: Enter the Proposed Height Select the applicable radio-button for "Is assembly/disassembly required after the Initial Phase?" | | | | | |
| | Enter the Proposed Height Select the applicable radio-button for "Is assembly/disassembly required after the | | | | | |



| | Step | Action | | | | | | |
|----|------|--|--|--|--|--|--|--|
| | | When "Is assembly/disassembly required after the Initial Phase?" is select an addition drop down is displayed for PGL1 Expiration Date | | | | | | |
| | | PGL1 Expiration Date* | | | | | | |
| 8. | | | | | | | | |
| | | Click the Calendar to a Month/Date/Year. | | | | | | |
| | | Is assembly/disassembly required for the Initial Phase?* | | | | | | |
| 9. | | PGL1 Expiration Date* | | | | | | |
| | | February 2020 > | | | | | | |
| | | Mon Tue Wed Thu Fri Sat Sun | | | | | | |
| | | 27 28 29 30 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 29 01 02 03 04 05 06 07 08 | | | | | | |
| | | 02 03 04 05 06 07 08 | | | | | | |
| 10 | | | | | | | | |
| | | At the top-left of the screen, click Save . | | | | | | |
| | | Save Review and File | | | | | | |
| | | CN00031820 Prototype & Phase Information | | | | | | |
| | | General Information Prototype Search | | | | | | |
| | | Prototype & Phase Search by:* Prototype Number Crane Type Crane Type | | | | | | |
| | | Documents Prototype Number* | | | | | | |
| | | Statements & Signatures CP00001822 Q Search & Add | | | | | | |
| | | | | | | | | |



| | Step | Action | |
|----|------|--|--|
| | | A Notification pop-up window displays Job filing has been saved. Click OK to continue. | s with the message |
| 11 | | Notification | × |
| | | Job filing has been saved. | |
| | | You have completed t Continue to | he Prototype & P the next section. |



Upload Documents

Complete the following steps to upload documents in the **Documents** tab to support the application:

| | Step | Action | |
|----|------|---|--------------------------|
| | | Click Documents to displa | y the Documents section. |
| | | Save Review and File | 2 |
| 1. | | CN00011919 | Documents |
| | | General Information | Required Documents |
| | | Prototype & Phase Information | |
| | | Documents | + Add Document |
| | | Statements & Signatures | Document Name |
| 2. | | Click +Add Document . | |
| | | Documents | |
| | | + Add Document Document Name | |
| 3. | | | |
| | | The Upload Document po Type the Docume Select the Docum | |
| | | Upload Document | |
| | | Document Name* | |
| | | Document Type* Select: | |
| | | Document Choose File No file chosen | |
| | | | |
| | | Upload | Cancel |



| | Step | Action | | | | | | |
|----|------|-----------------------|--|---|------------------------------------|-------------------------|-----------------------|---|
| | | Click Choose I | Click Choose File to upload the Document Type selected. | | | | | |
| | | Document Type | e* | | | |] | |
| | | Manual | | | | • | | |
| | | Document | | | | | | |
| 4. | | Choose File | No file chosen | | | | | |
| | | L | | | | | | |
| | | The Documen | nt pop-up window d | isplays. | | | | |
| | | | cument and click O | | | | | |
| | | Open | | | | | X | I |
| 5. | | ~ ~ | istration ▶ Training Team Tools ▶ Forms P | DF Documents to upload in | filings | ✓ ⁴ → Search | Forms PDF Documents 🔎 | |
| | | Organize 🔻 New folde | er | | | | ii • 🚺 🔞 | |
| | | Desktop م | Name | Date modified | Type | Size | | |
| | | Recent Places | 🔁 Fence.docx 🔁 Flood Zone Restrictive Declaration | 10/3/2017 4:35 PM 8/30/2017 1:31 PM | Adobe Acrobat D Adobe Acrobat D | 155 KB 43 KB | | |
| | | 🕌 Change Managei | 🔁 ID | 10/29/2018 11:13 | Adobe Acrobat D | 291 KB | | |
| | | 🦰 Librarier | Notice to Proceed to Contractor | 9/18/2017 9:29 AM | | 257 KB | | |
| | | Documents | 🔁 OP49 Supporting Document 🔂 Physical Exam | 11/8/2018 2:00 PM 10/29/2018 11:11 | | 79 KB 475 KB | | |
| | | J Music | Plan or Sketch | 8/30/2017 10:56 AM | | 339 KB | | |
| | | Pictures | 🔁 PlansSketch | 9/15/2017 12:25 PM | | 339 KB | | |
| | | H Videos | 🔁 Scaffold 🔁 Shed | 10/3/2017 4:34 PM 10/3/2017 4:32 PM | | 190 KB 127 KB | | |
| | | r Computer | 🔀 Special Inspector bad upload | 7/11/2017 12:35 PM | | 165 KB | | |
| | | | 🔁 SSN | 10/29/2018 11:14 | Adobe Acrobat D | 179 KB | | |
| | | | 🔁 TR1 Design Applicant 🔁 TR1 Progress Inspector | 8/30/2017 1:40 PM | | 636 KB | | |
| | | | TR1 Special Inspector | 8/30/2017 2:13 PM 8/30/2017 12:12 PM | | 789 KB 589 KB | | |
| | | - | 🔁 Visual | | Adobe Acrobat D | 74 KB | | |
| | | File na | ame: Manual | | | ✓ Custom | Files 👻 | |
| | | | | | | Oper | Cancel | |
| ~ | | | | | | | | |
| 6. | | | | | | | | |
| | | The Documen | nt displays next to C | hoose File. | | | | |
| | | | · · · · · · · · · · · · · · · · | | | | | |
| | | Click Upload . | | | | | | |
| | | | | | | | | |
| | | Document Type | * | | | | | |
| | | Manual | | | • | | | |
| | | | | | | | | |
| | | Document | | | | | | |
| | | Choose File | Manual.pdf | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | Upload | Cancel | | | | |
| | | | | |] | | | |



| | Step | Action | | | | | |
|----|-------|--|--|-------------------------------|------------------------------------|---------|--|
| | | A Notification pop-up window displays with the message: Document has been uploaded. Click OK to continue. | | | | | |
| 7. | | Notification | | × | | | |
| | | Document has been uploaded. | | | | | |
| 8. | Note: | The Document uploaded Click the edit () icon Click the trash can () Click the upload () ico Documents + Add Document Document Name Mobile Crane Manual | to update the Docun icon to delete the Do | nent information. ocument. | v uploaded. Uploaded On 09/19/2019 | Actions | |
| δ. | | At the top-left of the scr Save Review and File CN00011919 General Information Prototype & Phase Information Documents Statements & Signatures | | | | | |



| | Step | Action | | | |
|----|------|--|--|--|--|
| | | A Notification pop-up window displays with the message: Job filing has been saved. Click OK to continue. | | | |
| 9. | | Notification × Job filing has been saved. | | | |
| | | You have completed the Upload Documents. Continue to the next section. | | | |



Complete Statements & Signatures

Complete the following steps to complete the attestations in the Statement & Signatures Tab:

| | Step | Action | | | | |
|----|-------|---|---|--|--|--|
| | | Click Statements & Signa | tures to display the Statements & Signatures section. | | | |
| | | 🛱 Save 📄 🖹 Review and File | | | | |
| 1. | | CN00011919 | Statements & Signatures | | | |
| | | General Information | Applicant's Statement* | | | |
| | | Prototype & Phase Information | As a condition of being granted a license/registration and/or qualif New York City Administrative Code and Department rules, regulatic their specific trade. | | | |
| | | Documents Statements & Signatures | I have reviewed the information provided in this application and, falsification of any statement made to the Department is a misdem accept, any benefit, monetary or otherwise, either as a gratuity for p | | | |
| | Note: | The statement applicable to the Stakeholder that's logged in highlights in blue. | | | | |
| | | Applicant's Statement* | | | | |
| | | Administrative Code and Department rul I have reviewed the information provide made to the Department is a misdemear a gratuity for properly performing the jo qualification. In the event of an accident that involve requires that I cooperate with any investi I understand and agree that by personal that this electronic signature shall have the | nse/registration and/or qualification from the New York City Department of Buildings, I attest that I comply with all New York City es, regulations, and directives governing how licensees/ registrants/qualification holders conduct their specific trade. In this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any statement for 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 b or in exchange for special consideration. Such actions are punishable by imprisonment, fine and/or loss of license/registration and/or es my actions undertaken in connection with my license/registration and/or qualification, I understand that the Administrative Code igation and that failure to do so may result in immediate suspension, revocation or other disciplinary action. Iy clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand he same validity and effect as a signature affixed by hand. | | | |
| | | Name | Date | | | |



| | Step | Action | | | | | |
|----|---|---|---|------------|--|--|--|
| | APPLI | CANT OF RECORD | | | | | |
| | Click the Applicant's Statement checkbox to electronically attest. The Name and Date field's auto-populate by the system. | | | | | | |
| 2. | | that this electronic signature shall have | ally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I u the same validity and effect as a signature affixed by hand. | inderstand | | | |
| | | Name JOE ADAM (Electronically Signed) | Date 09/19/2019 | | | | |
| | | At the top-left of the scr | reen, click Save . | | | | |
| 3. | | Pave Review and File | | | | | |
| | | CN00011919 | Statements & Signatures | | | | |
| | | General Information | Applicant's Statement* | | | | |
| | | Prototype & Phase Information | As a condition of being granted a license/registration and/or qualif New York City Administrative Code and Department rules, regulatic their specific trade. | | | | |
| | | Documents Statements & Signatures | I have reviewed the information provided in this application and falsification of any statement made to the Department is a misdem accept, any benefit, monetary or otherwise, either as a gratuity for p | | | | |
| 4. | | A Notification pop-up w Job filing has been saved | vindow displays with the message: d. | | | | |
| | | Click OK to continue. | | | | | |
| | | Notification Job filing has been saved | СК | | | | |



| | Step | Action | |
|----|-------|--|--|
| | EQUIP | PMENT USER'S STAT | EMENT |
| 5. | | Save Preview to File CN00023319 General Information Prototype & Phase Information | natures tab scroll-down to the Equipment User's Statement. Name JOE ADAM (Electronically Signed) uipment User's Statement* As a condition of being granted a license/registration and/or qualification Administrative Code and Department rules, regulations, and directives govern I have reviewed the information provided in this application and, to the best |
| 6. | | The Name and Date field | er's Statement checkbox to electronically attest. d's auto-populate by the system. by clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand he same validity and effect as a signature affixed by hand. Date 09/19/2019 |
| 7. | | At the top-left of the scr | een, click Save . |
| | | CN00011919 | Statements & Signatures |
| | | General Information | Applicant's Statement* |
| | | Prototype & Phase Information Documents | As a condition of being granted a license/registration and/or qualif New York City Administrative Code and Department rules, regulatic their specific trade. I have reviewed the information provided in this application and |
| | | Statements & Signatures | falsification of any statement made to the Department is a misdem accept, any benefit, monetary or otherwise, either as a gratuity for p |



| | Step | Action | |
|----|------|--|--|
| | | A Notification pop-up window displays with the message: Job filing has been saved. Click OK to continue. | |
| 8. | | Notification × Job filing has been saved. | |
| | | You have completed the Statement & Signatures section. Continue to the next section. | |



Pay Fees

Complete the following steps to submit a payment application to the NYC Department of Buildings.

| Step | Action |
|-------|--|
| Note: | The job filing's fees must be paid before continuing to Preview to File. |
| | At the bottom-right of the screen, click Pay Now . |
| | Approved Dashboard |
| | Application Highlights |
| | View Filing |
| | History |
| | ▼ \$250.00 Pay Now |
| | |



| | Step | Action |
|----|------|---|
| | | The Payment Confirmation pop-up window displays with the message: |
| | | Please note that the following data cannot be changed after the payment has been made on this filing: |
| | | Owner Type: Individual |
| 2. | | Are you sure you want to make a payment now for \$ 250.00 ? |
| | | Payment is not the last step. Click the Review and File/Submit button at the top of the screen to submit the application. |
| | | Please confirm that your pop-up blocker is turned off before proceeding to Payment. |
| | | Click Yes , to proceed. |
| | | Payment Confirmation |
| | | Please note that the following data cannot be changed after the payment has been made on this filing: |
| | | Owner Type: Individual |
| | | Are you sure you want to make a payment now for \$250.00 ? |
| | | Payment is not the last step. Click the Review and File/Submit button at the top of the screen to submit the application. |
| | | Please confirm that your pop-up blocker is turned off before proceeding to Payment. |
| | | Yes No |



| Ĩ | Step | Action |
|----|------|--|
| | | The page is redirected to NYC City Pay. Pay the application fees via eCheck or Credit Card by selecting the applicable tab. |
| 3. | | Enter Payment Details 1. Select Items 2. Enter Payment 3. Review and Pay |
| | | Payment Amount: \$2,000.00 Credit Card |
| | | C & D: APPLICATION AMENDMENT DOB NOW Build Prototype : CP00001582-OA000003 : Amendment Crane Prototype \$2,000.00 To pay by electronic check, you will need your checking account and routing number. There is no additional fee. |
| | | Billing Information First Name * |
| | | Country * United States * |
| 4. | | The Notification pop-up window displays on the DOB NOW page with the message: Payment has been processed. A receipt will be sent by email. Select History for more information. |
| | | Click OK to proceed. |
| | | Notification × Payment has been processed. A receipt will be sent by email. Select History for more information. |
| | | OK |
| | | You have completed the Pay Fees section. |
| | | Continue to the next section. |



Complete Review and File

Complete the following steps to review and submit the application to the NYC Department of Buildings.

| | Step | Action |
|----|-------|---|
| | APPLI | CANT OF RECORD |
| | | At the top-left of the screen, click Review and File . |
| 1. | | DOB NOW Submit Filings, Payments, and Requests t |
| | | Save Review and File |
| 2. | | The Application Preview displays. Click Next to read and progress through the Application Preview to the final page. |
| | | Application Preview |
| | | Application Highlights Location 280 BROADWAY MANHATTAN, NEW YORK Crane Notice Number CN00033820 Crane Application Status Active Crane Notice Type Crane Notice Filing Type Crane Notice Filing Type Self-Erecting Tower Crane Current Filing Status Pre-filing Crane Notice Status CN Application - Pre-filing |
| | Note: | If errors are discovered when Review and File is selected, click Return to Filing View , correct the errors, re-attest, and Review and File again. |



| Step | Action | |
|------|--|--|
| | On the final page, click the checkbox to attest reviewing the 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 I file C Return to Filing View | |
| i. | | |
| | The Name and the Date field's auto-populate after the check-box is clicked. Click File , to proceed. | |
| | Name JOE ADAM Date 09/20/2019 (Electronically Signed) | |
| | A Notification pop-up windows displays with the message: Job filing has been submitted. An email notification will be sent with the status of the review. Click OK to close the Confirm pop-up window. | |
| | Notification × Job filing has been submitted. An email notification will be sent with the status of the review. OK OK View Filing | |
| Note | The Status Bar updates to the next stage in the job filing process (e.g., Pending QA Assignment). | |
| | | |
| | Pre-filing Pending QA Assignment Pending QA Admin Review Accepted (QA) | |
| | You have completed the Initiate a Crane Notice Application Step-by-Step Guide. | |



Job Filing Statuses

| | Step | Action |
|----|--------|--|
| | Job Fi | ling Status Incomplete |
| | Note | When a Job Filing receives and Incomplete, Approval, Temporary Approval, Approved, and |
| | | Disapproved the applicant is informed of the return via email. |
| | | The Process is the same for Prototype Amendment and Supplement |
| | | Incomplete |
| 1. | | When the Job Filing receives an incomplete disposition, documents will have a status of rejected when uploaded documents are missing information or incorrect. |
| | | Pre-filing Pending QA Assis Pending QA Admir Pending PE Assig PE Review in Pr. Pending CPE/ACPE Approved |
| | 2. | Hoover over the History square then click on Trace History. |
| | | Trace History Payment History |
| - | 3. | The History displays with the comment for the incomplete item. |
| | | Trace History × |
| | | CN00064420 |
| | | 09/19/2019 Incomplete Please upload the correct Acris Report |



| Step | Action |
|------|--|
| 4. | Click Save then Resubmit. |
| | The applicant can resolve the issues and resubmit the application, which is returned to the |
| | same QA Admin who issued the incomplete disposition. |
| | |
| | Pre-filing Pending QA Assig Pending QA Admir Pending PE Assig |
| | |
| | 💾 Save 📄 Resubmit |
| 5. | Issue Objections |
| | The Plan Examiner selects an objection from a dropdown list of objections. |
| | • The PE also specifies whether a meeting with the applicant to discuss the objections |
| | is allowed: if a meeting is allowed, the applicant can schedule a meeting through the system. |
| | if a meeting is not allowed, the applicant will not have the opportunity to schedule a |
| | meeting. |
| | The application is returned to the applicant for resolution. When the applicant |
| | resolves the objections and resubmits their application, it's returned to the same PE |
| | who issued the objections. |
| | (Please refer to the Objections and Appointment Step by Step) |
| | |
| | Pre-filing Pending QA Assig Pending QA Admir Pending PE Assig PE Review in Pro Pending CPE/ACPE Approved |
| 6. | Full Approval |
| | Full Approvals have no expiration date. A formal full approval letter is in the document |
| | section of the Job Filing. |
| | Pre-filing Pending QA Assig Pending QA Admir Pending PE Assig PE Review in Pro-Pending CPE/ACPE Approved |
| | |
| | |



| Step | Action |
|------|--|
| | Disapproved |
| | The applicant is notifed request is denied. |
| | Pre-filing Pending QA Assig Pending QA Admir Pending PE Assig PE Review in Pr Pending CPE/ACPE Disapproved |
| | In the Job Filing hoover over the History square then click on Trace History. Trace History Image: Comparison of Comparison |
| | Trace History * |
| | O3/06/2020 Plan Examiner Disapproved |



Self-Erecting Tower Crane CN: Tag Crane Device

Complete the following steps to assign the CD to CN within the application:

| | Step | Action | | | |
|----|-------|--|--|--|--|
| | APPLI | ICANT OF RECORD | | | |
| | Note: | The initial CN Application must be approved before assigning a Crane Device to a Crane Notice. | | | |
| | | Only the PE can file for a CN Number. | | | |
| | | A single CD number can have one or many associated CN numbers but a CN number can only be associated with a single CD number. | | | |
| | | From the Dashboard, select the Crane Notices tab. | | | |
| L. | | + Prototype + Grane Device + Grane Notice + Onsite Waiver + Master Rigger Notification | | | |
| | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver Image: Crane Notice Status V Address V Crane Type V Actions | | | |
| | | Filter Filter Filter Filter Filter | | | |
| 2. | | Locate the Crane Notice application. Under the Actions column, select Assign Crane Device . | | | |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | | |
| | | Job Number Notice Type Filing Type Filing Status Crane Notice Status Address Crane Type Actions Filter Filter Filter Filter Filter Filter Filter Filter | | | |
| | | CN00033820 Crane Notice New Approved CN Application - Approved 280 BROADWAY Self Erecting Tower Crane Select Action: | | | |
| | | CN00033020 Crane Notice New Approved CN Application - Approved 350 5 AVENUE Self Frecting Amendment Tower Crane Notice Update PGL-1 Pre-filing CN Application - Approved 280 BROADWAY Self Frecting Create AHV | | | |
| | | A000002 Insurance Tower Crane CN00031920 Crane Notice New Pre-filing CN Application - Pre-filing 350 5 AVENUE Self Erecting Select Action: • | | | |
| | Note: | To filter the Crane Notices by Crane type select the respective tab (e.g., Self-Erecting Tower Crane). | | | |
| | | | | | |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | | |



| | Step | Action |
|----|-------|--|
| | | A Confirm pop-up window displays with the message (sample): Confirm you want to tag a Crane Device to CN00033820. Click Yes to proceed. |
| 3. | | Confirm |
| | | Confirm you want to tag a Crane Device to CN00033820. |
| | Note: | The page refreshes and displays the additional items: |
| | | Notification to Search & assign Crane Device to Notice Notify DOB drop-down list |
| | | 3. Additional Tab: Tag Crane Device |
| | | Pre-filing Pending QA Assignment Pending QA Assignment Pending PE Assignment PE Review in Process Approved Image: Submit I |
| | | CN00033820 Tag Crane Device to Crane Notice In Progress General Information Device Search Device Number Prototype & Phase Information Device Number Prototype Number Tag Crane Device Device Number Oprototype Number |
| | | Documents Device Information - Self-Erecting Tower Crane Statements & Signatures Statements & Signatures |
| | | You have begun the process for Tag Crane Device . Continue to the Complete Assign Crane Device to Crane Notice section. |



Complete Assign Crane Device to Tag Crane Device Tab

Complete the following steps to complete the **Assign Crane Device to Crane Notice** Tab for the application:

| 3 | Step | Action |
|----|-------|---|
| | APPLI | ICANT OF RECORD |
| | | Within the Tag Crane Device tab, select the applicable Search by (<i>e.g. Prototype Number</i>) radio button in Device Search. |
| 1. | | Save Submit Search & assign crane device to crane notice × |
| | | CN00023319 Assign Crane Device to Crane Notice General Information Device Search Prototype & Phase Information Search by:* Tag Crane Device Device Number* Q Search & Add |
| | Note: | Documents To search by Device Number: Enter the Device Number in the Device Number field. Image: Search & assign crane device to crane notice |
| | | Assign Crane Device to Crane Notice |
| | | Device Search Search by:* Device Number Device Number* Q Search & Add |
| | | To search by Prototype Number: Select the Prototype Number from the Prototype Number drop-down list. |
| | | Tag Crane Device to Crane Notice |
| | | Device Search Search by:* Prototype Number* Select Prototype: |



| | Step | Action | | | |
|----|------|--|--|--|---|
| | | Click Search & Add to | proceed. | | |
| 2 | | Search by:* Prototype Number* CP00001605 | Prototype Number Search & Add | ○ Crane Type | |
| 2. | | The Search Results po | p-up window displays. | | |
| | | | e applicable Prototype Number. | | |
| 3. | | Click +Add to proceed | | | |
| | | Search Results | | | |
| | | Selected : CD00001329 | | Filter Search Results From Here | Q |
| | | Device Number CD00001329 | Device Status Manufactu Approved for Use Pending Inspection 11/2013 | ured Date Serial Number 987654231 | ^ |
| | | Crane Type Mobile Crane | Device Expiry Date 10/03/2020 | Actual Rated Capacity 10000 Kips | |
| | | Actual Boom 4500 Feet | Actual Jib Not Applicable | Other Attachments Not Applicable | |
| | | Actual Freestanding Height Not Applicable | Total 4500 Feet | Actual Configuration (Min) 5000 Lbs | |
| | | Actual Configuration (Max) 10000 Feet | Transmission Type Mechanical | Power Gas | |
| | | Climbing Type Not Applicable | Width with Outtriggers Extended 5000 Feet | Overall Carrier Length 10000 Feet | |
| | | Overall Carrier Width 10000 Feet | Overall Carrier Tailswing 10000 Feet | | |
| | | Boom Types Articulating, | | | |
| 4. | | 1 to 1 of 1 records | + Add Cancel | | |
| | | A Notification pop-up | window displays with the message | :: | |
| | | Prototype has been ad | | | |
| | | Click OK to proceed. | | | |
| | | Notification | | × | |
| | | Prototype has been | added. | | |
| | | | ОК | | |



| | Step | Action | | | | |
|----|-------|--|--|--|--|--|
| | Note: | The Device Number added, displays within the Device Information – Self Erecting Tower Crane. | | | | |
| | | Click the details (Details) icon to view the Device Number information. | | | | |
| | | Click the trash can (Delete) icon to delete the Device Number. | | | | |
| | | Device Information - Mobile Crane | | | | |
| | | Device Number Device Status Review Status CD00001329 Approved for Use Pre-filing | | | | |
| - | | At the top-left of the screen, click Save . | | | | |
| 5. | | O | | | | |
| | | Pre-filing Pending QA Assignment Pending QA Admin Review | | | | |
| | | H Save Submit | | | | |
| | | CN00023319 Assign Crane Device to Crane Notice | | | | |
| 5. | | A Notification pop-up window displays with the message: | | | | |
| | | Job filing has been saved. | | | | |
| | | Click OK to proceed. | | | | |
| | | Notification | | | | |
| | | Job filing has been saved. | | | | |
| 7. | | ОК | | | | |
| | | At the top-left of the screen, click Submit . | | | | |
| | | Pre-filing Pending QA Assignment Pending QA Admin Review | | | | |
| | | H Save | | | | |
| | | CN00023319 Assign Crane Device to Crane Notice | | | | |
| | | | | | | |



| | Step | Action | | | |
|----|------|---|--|--|--|
| | | A Confirm pop-up window displays with the message: Confirm you want to submit. Click Yes to proceed. | | | |
| 8. | | Confirm Confirm you want to submit. Yes No | | | |
| 9. | | A Notification pop-up window displays with the message: Job filing has been submitted. Click OK to proceed. | | | |
| | | Notification × Job filing has been submitted. | | | |
| | You | have completed the Complete Assign Crane Device to Crane Notice Step-by-Step Guide. | | | |



Self-Erecting Tower Crane CN: Assign A/D Director

Complete the following steps to assign the A/D Director within the application:

| | Step | Action | | | |
|----|-------|---|--|--|--|
| | EQUIF | PMENT USER | | | |
| | Note: | This section displays if assembly/disassembly is required after the Initial Phase. The A/D Director does not have to be licensed. | | | |
| | | From the Dashboard, select the Crane Notices tab. | | | |
| 1. | | + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit | | | |
| | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications | | | |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | | |
| 2. | | Locate the Crane Notice application. Under the Actions column, select Assign A/D Director . | | | |
| | | | | | |
| | | CH00033820 Crane Notice New Approved CN Application Approved - CD Assigned 280 BROADWAY Select Action: ✓ © CH00033820 Crane Notice New Approved CN Application - Approved 350 5 AVENUE Select Action: ✓ © CH00033200 Crane Notice Update FGL-1 Pre-filing CN Application - Approved 280 BROADWAY Select Action: ✓ © CH00033200 Crane Notice Update FGL-1 Pre-filing CN Application - Approved 280 BROADWAY Select Action: ✓ © CH00033200 Crane Notice Update FGL-1 Pre-filing CN Application - Approved 280 BROADWAY Select Action: ✓ © CH0003200 Crane Notice Update FGL-1 Pre-filing CN Application - Approved 280 BROADWAY Select Action: ✓ © CH000022 Crane Notice Numerice Pre-filing CH14 Extra Pre-filing CH14 Extre | | | |
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane). | | | |
| | | | | | |
| | | | | | |



| | Step | Action | | | | |
|--|-------|--------------------------------------|--|---|-------------------------------|------------------------------------|
| A Confirm pop-up window displays with the r | | | | lays with the message (sa | ample): | |
| | | Confirm you w | vant to assign the | Assembly/Disassembly D | Director on CN00031820 | |
| | | Click Yes to pr | oceed. | | | |
| | | Confirm | | | | |
| 3. | | Comm | | | | |
| | | Confirm you w Director on CN | - | ssembly/Disassembly | | |
| | Note: | 1. Notif | reshes and display ication to Assign tional Tab: A/D D | | | |
| | | | | | | |
| | | Pre-filing | | ending QA Admin Review Pending PE Assignment | PE Review in Process Approved | y DOB - Dashboard |
| | | CN00031820 | Assign A/D Director | | In I | Progress Application Highlights |
| | | General Information | A/D Director Information | | | |
| | | Prototype & Phase Information | Email* Enter email/username | Last Name | First Name | View Filing |
| | | Tag Crane Device | License Type* | License Number | Rigger Type* | 3 |
| | | A/D Director | 2 Select: | • | Select Rigger Type: | History |
| | | Documents Statements & Signatures | Business Name* Select: | Business Address | City | \$0.00 Pay Now |
| | | Statements & Signatures | State | Zip Code | Business Telephone | • |
| | | | Mobile Telephone | | | Print Certificate |
| | | | | | | |
| | | N | - | he process for Assign an Complete A/D Director | | |



Complete A/D Director Tab

Complete the following steps to complete the A/D Director tab for the application:

| | Step | Action | | | | |
|----|-------|---|---|--|---|----|
| | EQUIP | MENT USER | | | | |
| 1. | | Type the Select th Select th | e License Type (e.g., I | t the Email Address Individual) from the Master Rigger) from | from the blue-drop down License Type drop-down list the Rigger Type drop-down | |
| | Note: | - | | • | First Name Rigger Type* Select: City Business Telephone | - |
| | | CN00023319 General Information Prototype & Phase Information Assign CD to CN A/D Director Documents Statements & Signatures | Assign A/D Director A/D Director Information Email* License Type* Select: Business Name* Select: State Mobile Telephone | Last Name License Number Business Address Zip Code | First Name First Name Rigger Type* Select: Cay Business Telephone | D. |



| ſ | Step | Action |
|----|-------|---|
| | | At the top-left of the screen, click Save . |
| | | Pre-filing Pending QA Assignment Pending |
| 2. | | Save |
| | | A Notification pop-up window displays with the message: |
| | | Job filing has been saved. |
| 3. | | Click OK to continue. |
| | | Notification × |
| | | Job filing has been saved. |
| | | |
| | | OK |
| | | |
| | A/D D | DIRECTOR |
| 4. | | Locate the Crane Notice application. |
| | | Under the Actions column, select Assign A/D Director. |
| | | DOB Now DOB NOW Welcome, IOE ADAM ACEESTIGGMAR.COM Submit Filings, Payments, and Requests to the NYC Department of Buildings Need Help: Sign Out |
| | | + Prototype + Crane Device + Master Rigger Notification + ANY Permits |
| | | My Prototypes My Crane Devices My Crane Notices My Rigger Notifications My AHV Work Permits Search All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver Climber Movement |
| | | Job Number v Notice Type v Filling Status v Crane Notice Status v Address v Crane Type v Actions |
| | | Alter Filter Filter Filter Filter |
| | | CN00023319 Crane Notice New Approved CN Application Approved - CD Assigned 280 BROADWAY Mobile Crane Select Action: C |
| | | CN00022619 Crane Notice New Approved CNVApplication Approved - Kegister Interchangeable 90 BrCAU Tower Crane Amendment Parts - Accepted STREET |
| | | Accepted Print Certificate Print Certificate Renewal |
| | | CN00022319 Clarke Houlds International Approved Expired 260 encontract Distribution Title Select Action: • |



| | Step | Action | | | |
|----|-------|--|--|---|--|
| | | | low displays with the message | | |
| | | Confirm you want to as | sign the Assembly/Disassembl | ly Direc | tor on CN00031820. |
| | | Click Yes to proceed. | | | |
| 5. | | Confirm | | | |
| | | Confirm you want to assi Director on CN00031820 | | | |
| | | L | Yes No | | |
| | | The page refreshes and Select the A/D Director | displays the Crane Notice app | olicatior | n. |
| 6. | | | (85. | | |
| | | CN00022219 | Assign A/D Director | | |
| | | General Information | A/D Director Information | | |
| | | Prototype & Phase Information | Email* | | Last Name |
| | | Assign CD to CN | AJOETEST2@GMAIL.COM | | JOE2 |
| | | A/D Director | License Type* | | License Number |
| | | Documents | Preparer | • | 023107 |
| | Note: | A/D Director's Statement* As a condition of being granted a lic Administrative Code and Department I have reviewed the information pro statement made to the Department I otherwise, either as a gratuity for pro- license/registration and/or qualificati | ble to the Stakeholder that's lo ense/registration and/or qualification from the New York Cit rules, regulations, and directives governing how licensees/ re vided in this application and, to the best of my knowledge is a misdemeanor and that it is also unlawful to give to a cit perly performing the job or in exchange for special consider on. conally clicking on the box at left 1 am electronically signing ure shall have the same validity and effect as a signature affixed | ty Department gistrants/quali and belief, at y employee, o ration. Such act | of Buildings, I attest that I comply with all New York City fication holders conduct their specific trade. test to its accuracy. I understand that faisfication of any r for a city employee to accept, any benefit, monetary or tions are punishable by imprisonment, fine and/or loss of |
| | | Name | | Date | |



| Step | Action |
|------|--|
| | Click the A/D Director's Statement checkbox to electronically attest. |
| | The Name and Date field's auto-populate by the system. |
| | A/D Director's Statement* |
| | 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. |
| | 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 ELV DIRECTOR 02/05/2020 |
| | (Electronically Signed) |
| | Submit |
| | |
| | Below the Name and Date fields, click Submit. |
| | A/D Director's Statement* |
| | 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. |
| | Independent 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 |
| | ELV DIRECTOR 02/05/2020 |
| | (Electronically Signed) |
| | |
| | |
| | A Notification pop-up window displays with the message: |
| | Confirm you want to submit the A/D Director's Statement. |
| | Click Yes to continue. |
| | Confirm |
| | |
| | Confirm you want to submit the A/D Director's Statement. |
| | Yes No |



| | Step | Action |
|-----|-------|--|
| LO. | | A Notification pop-up window displays with the message: Job filing has been submitted. Click OK to continue. Notification × Job filing has been submitted. |
| | EQUIP | MENT USER |
| | Note: | Date Name |
| .1. | | Click the Equipment User's Statement checkbox to electronically attest. The Name and Date field's auto-populate by the system. |
| .2 | | 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. 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 ADAM JOE2 (Electronically Signed) |
| | | At the top-left of the screen, click Save. |



| | Step | Action |
|-----|------|--|
| 13 | | A Notification pop-up window displays with the message: Job filing has been saved. Click OK to continue. Notification × Job filing has been saved. |
| 14 | | At the top-left of the screen, click Submit. |
| 15 | | A Confirm pop-up window displays with the message: Confirm you want to submit. Click Yes to proceed. Confirm Confirm you want to submit. |
| 16. | | Yes No A Notification pop-up window displays with the message: Job filing has been submitted. Click OK to proceed. Notification Job filing has been submitted. |



| Step | Action |
|------|--|
| | You have completed the Assign A/D Director Step-by-Step Guide. |
| | Continue to the next section. |



Self-Erecting Tower Crane CN: Assign Lift Director

Complete the following steps to assign the Lift Director within the application:

| | Step | Action |
|----|-------|---|
| | EQUIF | PMENT USER |
| | Note: | Only one Device Installer and one Lift Director can be assigned to a CN at a time. |
| | | From the Dashboard, select the Crane Notices tab. |
| 1. | | ★ Prototype ★ Crane Device ★ Crane Notice ★ Onsite Waiver ★ Master Rigger Notification ★ AHV Permit |
| | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| 2. | | Locate the Crane Notice application. Under the Actions column, select Assign Lift Director . |
| | | Image: Transport of the Care Device |
| | | Job Number Netice Type Filling Type Fi |
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane). |
| | | Image: Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AFV Permit Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver Image: Climber |
| | | Job Number Notice Type Filing Type Filing Status Crane Notice Status Address Crane Type Actions Filter Filter Filter Filter Filter Filter Filter Filter |



| Step | Action | | | | |
|-------|---------------------------------|--|---|----------------------|--|
| | A Confirm pop-up | window display | ys with the message (sa | mple): | |
| | Confirm you want | to assign the Li | ift Director on CN00031 | 820. | |
| | Click Yes to procee | ed. | | | |
| | Confirm | | | | |
| | Confirm you want CN00031820. | to assign the Lit | | | |
| Note: | | es and displays n to Assign a L | the additional items: | _ | |
| | 2. Additional | Tab: Lift Direc | tor | | Welcome JOE ACCELETIGON |
| | 2. Additional | d Requests to the NYC Depa | artment of Buildings | | Approved Dashb |
| | 2. Additional | d Requests to the NYC Depa ending QA Assignment Pend Pending QA Assignment Pend Pende assign I | artment of Buildings | PE Review in Process | Approved |
| | 2. Additional | d Requests to the NYC Depa ending QA Assignment Pend Pending QA Assignment Pend Pender assign I | artment of Buildings | | Approved In Progress |
| | 2. Additional | d Requests to the NYC Depa d Requests to the NYC Depa Pending QA Assignment Pend Pending QA Assignment Pend Pending QA Assignment Pend Pender State Pending QA Assignment Pend Pender State Pender State Pe | artment of Buildings | | Approved In Progress |
| | 2. Additional | d Requests to the NYC Depa d Requests to the NYC Depa Pending QA Assignment Pend Pending QA Assignment Pend Pending QA Assignment Pend Pending QA Assignment Pend Pending QA Assignment Pending | artment of Buildings ding QA Admin Review Pending PE Assignment Kift director | 1 | Approved In Progress Need H Dashb Application Application Need H Dashb Application Need H Dashb Progress Need H Progress Need H Progress Need H Progress Need H Progress Need H Progress Need H Progress Need H Progress Need H Progress Progress Need H Progress Pr |
| | 2. Additional | d Requests to the NYC Depa d Requests to the NYC Depa Pending QA Assignment Pend Pending QA Assignment Pend Pende assign I Pende assign I | artment of Buildings ding QA Admin Review Pending PE Assignment tift director | First Name | ■ Notify DOB ▼ |



Complete Assign Lift Director Tab

Complete the following steps to complete the Assign Lift Director tab for the application:

| | Step | Action |
|----|-------|--|
| | EQUIP | PMENT USER |
| | | Within the Assign Lift Director tab, enter the Lift Director Information : Type the Email and then select the Email Address from the blue-drop down |
| 1. | | CN00023319 Assign Lift Director In Progress General Information Lift Director Information Lift Director Information Prototype & Phase Information Email* Last Name First Name Assign CD to CN Email* Business Address City Documents State Zip Code Business Telephone State Telephone Mobile Telephone Mobile Telephone |
| | Note: | The Lift Director Information fields: Last Name, First Name, Business Name, Business Address, City, State, Zip Code, Business Telephone, Mobile Telephone are greyed-out and cannot be edited. |
| 2. | | General Information Lift Director Information Prototype & Phase Information Email* Last Name First Name Assign CD to CN Enter email/username Business Address City Lift Director Business Name Business Address City Documents State Zip Code Business Telephone Mobile Telephone Mobile Telephone First Name First Name |
| | | At the top-left of the screen, click Save. |
| | | H Save Submit CN00023319 Assign Lift Director |



| | Step | Action |
|----|--------|---|
| | | A Notification pop-up window displays with the message: Job filing has been saved. Click OK to continue. |
| 3. | | Job filing has been saved. |
| | LIFT D | IRECTOR |
| 4. | | Locate the Crane Notice application. Under the Actions column, select Assign Lift Director . |
| | | DOB NOW Submit Filings, Payments, and Requests to the NYC Department of Buildings Welcome. JOE ADM Address Section 100 and Help? Need Help? Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out Image: Sign Out |
| 5. | | CN00022319 Crane Notice New Approved CN Application Approved - CD Assigned 280 BROADWAY Mobile Crane Select Action: Image: Control of the co |
| | | A Confirm pop-up window displays with the message (sample): Confirm you want to assign the Lift Director on CN00031820. Confirm Confirm you want to assign the Lift Director on CN00031820. Yes No |



| | Step | Action | | |
|-----|-------|---|--|--|
| | | The page refreshes and displays the Crane Notice application. Select the Lift Director tab. | | |
| 5. | | CN00023319 Assign Lift Director General Information Lift Director Information Prototype & Phase Information Email* Last Name First Name Assign CD to CN JOE ADAM ADAM Lift Director A LLC NVC NVC Documents State Zip Code Business Telephone | | |
| | Note: | Interstand applicable to the stakeholder that's logged in highlights in blue. If Director's Statement* As 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. In have reviewed the information provided in this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that faisfication of any statement made to the Department is a misdemenand 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 uputishable by imprisonment, fine and/or loss of license/registration and/or qualification. Inderstand and agree that by personally clicking on the box at left 1 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. Imprisonment, fine and/or loss of license/registration Date Interstand that this electronic signature shall have the same validity and effect as a signature affixed by hand. Imprisonment Date Imprisonment Imprisonment Imprisonment Imprisonment Imprisonment Imprisonment Imprisonment Imprisonment< | | |
| , - | | Click the Lift Director's Statement checkbox to electronically attest. The Name and Date field's auto-populate by the system. Lift Director's Statement* 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 New York City Administrative Code and Department rules, regulations, and directives governing how licensees/ registrants/qualification holders conduct 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 faislication 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 punishable by imprisonment, fine and/or loss of license/registration and/or qualification. I outderstand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of I testems. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand. Name I testING DOB (I tectronically Signed) Submit | | |



| | Step | Action |
|-----|------|--|
| | | Below the Name and Date fields, click Submit. |
| 8. | | 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. |
| | | Name Date TESTING DOB 02/05/2020 (Electronically Signed) 02/05/2020 |
| | | A Notification pop-up window displays with the message: |
| 9. | | Confirm you want to submit the Lift Director's Statement. Click Yes to continue. |
| | | Confirm |
| | | Confirm you want to submit the Lift Director's Statement. |
| 10. | | Yes No |
| | | A Notification pop-up window displays with the message: |
| | | Job filing has been submitted. |
| | | Click OK to continue. |
| | | Notification × |
| | | Job filing has been submitted. |
| | | OK |



| | Step | Action |
|----|-------|---|
| | EQUIF | PMENT USER |
| | Note: | The statement applicable to the stakeholder that's logged in highlights in blue. |
| | | Equipment User's Statement* 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. 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 the seame validity and effect as a signature affixed by hand. Name Date |
| 11 | | Click the Equipment User's Statement checkbox to electronically attest. The Name and Date field's auto-populate by the system. |
| | | Equipment User's Statement* 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/ registratis/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 faisification 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. 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 the electronic signature shall have the same validity and effect as a signature affixed by hand. Name Date ADAM JOE2 [Ju/08/2019] (Electronically Signed) [Dote/Data] |
| 12 | | At the top-left of the screen, click Save . |
| 13 | | Pre-filing Pending QA Assignment Pending Image: Save mathematication in the save mathemateris as easy as easy as ave mathematicatio |
| | | A Notification pop-up window displays with the message: Job filing has been saved. Click OK to continue. Notification × Job filing has been saved. |
| | | OK |

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| | Step | Action |
|-----|------|---|
| | | At the top-left of the screen, click Submit . |
| 14. | | Pre-filing Pending QA Assignment Pending |
| | | A Confirm pop-up window displays with the message: |
| | | Confirm you want to submit. |
| 15 | | Click Yes to proceed. |
| | | Confirm Confirm you want to submit. Yes No |
| 16. | | A Notification pop-up window displays with the message: |
| | | Job filing has been submitted. |
| | | Click OK to proceed. |
| | | Notification × |
| | | Job filing has been submitted. |
| | | You have completed the Assign Lift Director Tab Step-by-Step Guide. |
| | | Continue to the next section. |



Self-Erecting Tower Crane CN: Assign Hoist Machine Operator (HMO)

Complete the following steps to assign the Hoist Machine Operator (HMO) within the application:

| | Step | Action | | | | |
|----|------------|---|--|--|--|--|
| | PMENT USER | | | | | |
| | Note: | The Equipment User assigns the HMO and attest the form. The HMO must then login to the system to accept their assignment and provide their attestation. Changing the HMO(s) is not viewed as a PAA and does not have an accompanying fee. If an HMO is no longer associated with a CN, the Equipment User can remove them from the CN as well, with no fee. The system does not restrict the number of CN's to which an HMO is assigned, they can be assigned to multiple CNs at one time. Once the first HMO is assigned to the CN, the system allows the list of assigned HMO's to be edited at any time, until the device is removed from the CN. | | | | |
| L. | | From the Dashboard, select the My Crane Notices tab. | | | | |
| 2. | | | | | | |
| | | Locate the Crane Notice application. Under the Actions column, select Assign HMO(s) . | | | | |
| | | Image: Trans Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AIV Permit Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permit All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver Crane Notice Status v Address v Crane Type v Actions | | | | |
| | | Filter Filter Filter Filter Filter Filter Filter CN00033820 Crane Notice New Approved CN Application Approved - Lift Director 280 BROADWAY Self Erecting BROADWAY Self Erecting BROADWAY Self Erecting BROADWAY Self Crane Notice Self Crane Approved Self Crane Expired 280 BROADWAY Self Crane BROADWAY Self Crane Crane BROADWAY Self Crane Crane BROADWAY Self Crane Crane BROADWAY Self Crane Crane BROADWAY Self Crane BROADWAY Self Crane Crane BROADWAY Self Crane BROADWAY Self Crane BROADWAY | | | | |



| | Step | Action |
|----|-------|--|
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane). |
| | | ↑ Prototype ↓ Crane Device ↓ Crane Notice ↓ Crane Votice ↓ Crane Device ↓ Crane Notice ↓ Crane Votice ↓ Crane ↓ Crane Votice ↓ Crane ↓ |
| 3. | | A Confirm pop-up window displays with the message (sample): Confirm you want to assign the HMO(s) on CN00031820. Click Yes to proceed. |
| | | Confirm Confirm you want to assign the HMO(s) on CN00031820. |
| | Note: | Yes No The page refreshes and displays the additional items: |
| | | Notification to Assign HMO(s) Additional Tab: HMO(s) |
| | | DOB NOW Submit Filings, Payments, and Requests to the NYC Department of Buildings Wetcomes devision account of the NYC Department of Buildings Submit Filings, Payments, and Requests to the NYC Department of Buildings Pre-filing Pre |
| | | Assign CD to CN Lift Director HMO(6) Documents |
| | | You have begun the process for Assign HMO(s) . Continue to the Complete HMO(s) Tab section. |



Complete HMO(s) Tab

Complete the following steps to complete the HMO(s) tab for the application:

| | Step | Action | | | | | |
|----|-------|---------------------------------------|------------------------|-----------------------------------|------------------|-----------------------|----------------|
| | EQUIF | PMENT USER | 1 | | | | |
| ĺ | | Within the HM | IO(s) tab, click - | + Add HMO/Ope | rator. | | |
| | | H Save Submit | | | | | ■ Notify DOB ▼ |
| 1. | | CN00033820 | HMO/Operator(s |) Details | | | In Progress |
| | | General Information Prototype & Phase | + Add HMO/Operator | | | | |
| | | Information Tag Crane Device | First Name | Last Name | Email | Business N | Name |
| | | A/D Director | | | | | |
| | | Lift Director | | | | | |
| | | HMO/Operator(s) Documents | | | | | |
| | | | | | | | |
| 2. | | The HMO/Ope | erator Contact | Details pop-up w | indow displays. | | |
| | | Type t | he Email and th | hen select the Em | ail Address from | the blue drop-a | down. |
| | | Select | the License Typ | pe (e.g., Hoist M a | chine Operator) | from the drop- | down list. |
| | | Select | the Business N | ame from the Bu | siness Name dro | p-down list. | |
| | | HMO/Operator Co | ontact Details | | | | |
| | | | | | | | A |
| | | Email* | | Last Name | Firs | t Name | |
| | | Enter email/userna | ime | Lieuwe Numbert | | | |
| | | License Type* Select: | • | License Number* | | iness Name* elect: | • |
| | | Business Address | | City | Sta | te | |
| | | | | | | | |
| | | Zip Code | | Business Telephone | Mo | bile Telephone | |
| | | | | | | | |



| Step | Action | | | | | |
|-------|---|--|--|--|--|--|
| Note: | The HMO Contact Details fields: Last Name, First Name, Business Address, City, State, Zip Code, Business Telephone, Mobile Telephone are greyed-out and cannot be edited. | | | | | |
| | HMO/Operator Contact Details | | | | | |
| | Email* Enter email/username | Last Name | First Name | Â | | |
| | License Type* | License Number* | Business Name* | , | | |
| | Business Address | City | State | 11 | | |
| | Zip Code | Business Telephone | Mobile Telephone | | | |
| | | | | | | |
| Note: | The statement applica | ıble to the Stakeholder tha | t's logged in highlights in blue. | | | |
| | Equipment User's Statement* | | | | | |
| | As a condition of being gra with all New York City Adr holders conduct their specif | ministrative Code and Department rules, regu | n from the New York City Department of Buildings, I att lations, and directives governing how licensees/ registr | est that I comp ants/qualificatic | | |
| | I have reviewed the informa falsification of any stateme | ation provided in this application and, to the ent made to the Department is a misdemean benefit monetary or otherwise, either as i | best of my knowledge and belief, attest to its accuracy. or and that it is also unlawful to give to a city emplor gratuity for property performing the job or in exch oss of license/registration and/or qualification. | l understand the yee, or for a ci ange for speci | | |
| | employee to accept, any consideration. Such actions | are punishable by imprisonment, fine and/or | oss of license/registration and/or qualification. | | | |
| | | | oss of license/registration and/or qualification. electronically signing this application and expressing m me validity and effect as a signature affixed by hand. | | | |
| | | | | | | |
| | I understand and agree that all of its terms. I understand | | electronically signing this application and expressing my me validity and effect as a signature affixed by hand. | | | |
| | I understand and agree tha all of its terms. I understand Name | t by personally clicking on the box at left I an I that this electronic signature shall have the s | electronically signing this application and expressing my me validity and effect as a signature affixed by hand. Date | | | |
| | Click the Equipment Us | t by personally clicking on the box at left I and I that this electronic signature shall have the s | electronically signing this application and expressing my me validity and effect as a signature affixed by hand. | | | |
| | Click the Equipment Us | t by personally clicking on the box at left I an I that this electronic signature shall have the s | electronically signing this application and expressing my me validity and effect as a signature affixed by hand. | | | |
| | Click the Equipment User's Statement* As a condition of being gran | t by personally clicking on the box at left I and I that this electronic signature shall have the s ser's Statement checkbox eld's auto-populate by the ted a license/registration and/or qualificatio inistrative Code and Department rules, requ | electronically signing this application and expressing my me validity and effect as a signature affixed by hand. | y agreement wi | | |
| | Click the Equipment Use Click the Equipment Use The Name and Date field Equipment User's Statement* As a condition of being gran with all New York City Admi holders conduct their specific I have reviewed the informat falsification of any statemen employee to accept, any b | t by personally clicking on the box at left I and I that this electronic signature shall have the s ser's Statement checkbox eld's auto-populate by the ted a license/registration and/or qualification instrative Code and Department rules, regu trade. ion provided in this application and, to the t made to the Department is a misdemear enefit, monetary or otherwise, either as a | electronically signing this application and expressing my me validity and effect as a signature affixed by hand. | y agreement wi | | |
| | I understand and agree that all of its terms. I understand all of its terms. I understand Name Click the Equipment Use Click the Equipment Use The Name and Date fie Equipment User's Statement* As a condition of being gran with all New York City Admin holders conduct their specific I have reviewed the informat falsification of any statemen employee to accept, any be consideration. Such actions al I understand and agree that I | t by personally clicking on the box at left I and I that this electronic signature shall have the some ser's Statement checkbox eld's auto-populate by the ted a license/registration and/or qualification inistrative Code and Department rules, regu- it rade. Ion provided in this application and, to the t made to the Department is a misdemear enefit, monetary or otherwise, either as a reputishable by imprisonment, fine and/or I by personally clicking on the box at left I am | electronically signing this application and expressing my me validity and effect as a signature affixed by hand. Date to electronically attest. system. | y agreement with ttest that I com rrants/qualificat I understand t oyee, or for a h hange for spe | | |
| | I understand and agree that all of its terms. I understand all of its terms. I understand Name Click the Equipment Use Click the Equipment Use The Name and Date fie Equipment User's Statement* As a condition of being gran with all New York City Admin holders conduct their specific I have reviewed the informat falsification of any statemen employee to accept, any be consideration. Such actions al I understand and agree that I | t by personally clicking on the box at left I and I that this electronic signature shall have the some ser's Statement checkbox eld's auto-populate by the ted a license/registration and/or qualification inistrative Code and Department rules, regu- it rade. Ion provided in this application and, to the t made to the Department is a misdemear enefit, monetary or otherwise, either as a reputishable by imprisonment, fine and/or I by personally clicking on the box at left I am | electronically signing this application and expressing my me validity and effect as a signature affixed by hand. Date to electronically attest. system. n from the New York City Department of Buildings, I at lations, and directives governing how licensees/ regist per of my knowledge and belief, attest to its accuracy, or and that it is also unlawful to give to a city employ gratuity for properly performing the job or in exc sos of license/registration and/or qualification. electronically signing this application and expressing n | y agreement with ttest that I com rrants/qualificat I understand t oyee, or for a h hange for spe | | |
| | I understand and agree that all of its terms. I understand all of its terms. I understand Name Click the Equipment Use The Name and Date field Equipment User's Statement* As a condition of being gran with all New York City Admin holders conduct their specific I have reviewed the informat failed for a statement employee to accept, any be consideration. Such actions at all of its terms. I understand to the statement of the s | t by personally clicking on the box at left I and I that this electronic signature shall have the some ser's Statement checkbox eld's auto-populate by the ted a license/registration and/or qualification inistrative Code and Department rules, regu- it rade. Ion provided in this application and, to the t made to the Department is a misdemear enefit, monetary or otherwise, either as a reputishable by imprisonment, fine and/or I by personally clicking on the box at left I am | electronically signing this application and expressing my me validity and effect as a signature affixed by hand. Date to electronically attest. system. n from the New York City Department of Buildings, I at lations, and directives governing how licensees/ regist pest of my knowledge and belief, attest to its accuracy. or and that it is also unlawful to give to a city employ gratuity for properly performing the job or in exc pass of license/registration and/or qualification. electronically signing this application and expressing n me validity and effect as a signature affixed by hand. | ttesi ttesi ran . I ue han | | |



| | Step | Action |
|----|-------|---|
| | | Below the Name and Date fields, click Save. |
| | | 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 |
| 4. | | JOE ADAM 01/10/2020 (Electronically Signed) |
| | | Save Cancel |
| | | A Notification pop-up window displays with the message (sample): |
| | | BUILD172@BUILDINGS.NYC.GOV has been added as HMO/Operator on this filing. |
| 5. | | Click OK to proceed. |
| | | Notification × |
| | | BUILD172@BUILDINGS.NYC.GOV has been added as HMO on this filing. |
| | | OK |
| | Note: | The HMO added displays within the HMO(s) Details table. |
| | | Click the edit (${}^{\frown}$) icon to update the information. |
| | | Click the trash can ($\widehat{m{in}}$) icon to delete the HMO. |
| | | To add an additional HMO, repeat Steps 1 to 5 and continue. |
| | | HMO(s) Details |
| | | + Add HMO |
| | | First Name Last Name Email Business Name Identified Action |
| | | BUILD 172 BUILD172@BUILDINGS.NYC.GOV BUILD172 LLC No |
| | | |



| | Step | Action |
|----|-------|---|
| | HOIST | MACHINE OPERATOR (HMO) |
| 6. | | Locate the Crane Notice application. Under the Actions column, select Assign HMO(s). |
| 8. | | A Confirm pop-up window displays with the message (sample): Confirm you want to assign the HMO(s) on CN00031820. Click Yes to proceed. Confirm Confirm you want to assign the HMO(s) on CN00031820. |
| 0. | | The page refreshes and displays the Crane Notice application. Select the HMO(s) tab. In Progress General Information Prototype & Phase Information First Name List Name DoB DoB |



| | Action | | | | | | |
|---|--|---|---|--|---|---|--|
| | Select the edit (🕝) icon appl | icable to the HN | /IO Details fro | m the list. | | | |
| | HMO(s) Details | | | | | | In Progress |
| | | | | | | | |
| | + Add HMO First Name Last Name | Email | Business Name | Identified | Edit | Delete | |
| | | OBTESTING123@GMAIL.COM | T123 LLC | No | | 1 1 | |
| 0 | The HMO Contact Details po The statement applicable to Click the Equipment User's S The Name and Date field's a | the stakeholder Statement check | that's logged -box to elect | | | e. | |
| | HMO Contact Details | | | | | | |
| | | | | | | | |
| | Email* | Last Name | | First Nam | e | | |
| | Email* BUILD172@BUILDINGS.NYC.GOV | Last Name | | First Name BUILD | e | | |
| | | | | | | | |
| | BUILD172@BUILDINGS.NYC.GOV | 172 | | BUILD Business N | | RVICE | v |
| | BUILD172@BUILDINGS.NYC.GOV License Type* | 172 License Number* | | BUILD Business N | Name* | RVICE | · |
| | BUILD172@BUILDINGS.NYC.GOV License Type* Hoist Machine Operator | 172 License Number* • 007667 | | BUILD Business N FUSTON | Name* | RVICE | ¥ |
| | BUILD172@BUILDINGS.NYC.GOV License Type* Hoist Machine Operator Business Address | 172 License Number* • 007667 City | e | BUILD Business N FUSTON State | Name* N CRANE SEF | RVICE | • |
| | BUILD172@BUILDINGS.NYC.GOV License Type* Hoist Machine Operator Business Address 31-31 123RD STREET | 172 License Number* 007667 City FLUSHING | e | BUILD Business N FUSTON State NY | Name* N CRANE SEF | RVICE | v |
| | BUILD172@BUILDINGS.NYC.GOV License Type* Hoist Machine Operator Business Address 31-31 123RD STREET Zip Code 11354 | 172 License Number* 007667 City FLUSHING Business Telephon | e | BUILD Business N FUSTON State NY | Name* N CRANE SEF | RVICE | · · · · · |
| | BUILD172@BUILDINGS.NYC.GOV License Type* Hoist Machine Operator Business Address 31-31 123RD STREET Zip Code 11354 HMO's Statement* As a condition of being granted a lid comply with all New York City A registrants/qualification holders cond I have reviewed the information provi that falsification of any statement ma city employee to accept any benefit consideration. Such actions are punis ☑ I understand and agree that by pe agreement with all of its terms. I und | | qualification from the Department rules, re d, to the best of my kr misdemeanor and th ither as a gratuity for ne and/or loss of licen | New York City Dependent of the alton of the | Name* N CRANE SEF lephone lephone f, attest to its to give to a g the job a | Buildings, I erning hov s accuracy. I city emplo ion. | l understand yee, or for a e for special |
| | BUILD172@BUILDINGS.NYC.GOV License Type* Hoist Machine Operator Business Address 31-31 123RD STREET Zip Code 11354 HMO's Statement* As a condition of being granted a lit comply with all New York City A registrants/qualification holders condition of any statement mather that falsification of any statement mather that falsification of any statement mather that falsification. Such actions are punis Image: I understand and agree that by pe agreement with all of its terms. I understand. | | qualification from the Department rules, re misdemeanor and th ither as a gratuity for ne and/or loss of licen pox at left I am elec ic signature shall have | New York City Dependent of the same validity of the | Name* N CRANE SEF lephone lephone f, attest to its to give to a g the job a | Buildings, I erning hov s accuracy. I city emplo ion. | l understand yee, or for a e for special |
| | BUILD172@BUILDINGS.NYC.GOV License Type* Hoist Machine Operator Business Address 31-31 123RD STREET Zip Code 11354 HMO's Statement* As a condition of being granted a lid comply with all New York City A registrants/qualification holders cond I have reviewed the information provi that falsification of any statement ma city employee to accept any benefit consideration. Such actions are punis ☑ I understand and agree that by pe agreement with all of its terms. I und | | qualification from the Department rules, re misdemeanor and th ither as a gratuity for ne and/or loss of licen pox at left I am elec ic signature shall hav Da | New York City Dependent of the same validity of the | Name* N CRANE SEF lephone lephone f, attest to its to give to a g the job a | Buildings, I erning hov s accuracy. I city emplo ion. | l understand yee, or for a e for special |



| | Step | Action |
|------|------|--|
| 11 | | Below the Name and Date fields, click Save. 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 JOE ADAM 01/10/2020 |
| ± ±. | | (Electronically Signed) |
| | | A Notification pop-up window displays with the message: |
| 12 | | Confirm you want to submit the HMO/Operator's Statement. |
| 13: | | Click Yes to proceed. Confirm Confirm you want to submit the HMO/Operator's Statement. Yes No |
| 1 | | A Notification pop-up window displays with the message: |
| | | Job filing has been submitted. |
| | | Click OK to proceed. Notification × Job filing has been submitted. OK |
| | | You have completed the HMO(s) Tab Step-by-Step Guide. Continue to the next section. |



Self-Erecting Tower Crane CN: Notify DOB – Arrival of Device

Complete the following steps to notify DOB on the arrival of Crane Notice:

| Step | Action |
|-------|---|
| EQUI | PMENT USER |
| | From the Dashboard, select the Crane Notices tab. |
| | + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit |
| | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications |
| | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| | Locate the Crane Notice application. |
| | Under the Actions column, select Notify DOB. |
| | Job Number V Notice Type Filing Type V Filing Status V Crane Notice Status V Address V Crane Type V Actions |
| | CN00033820 Grane New Approved CN Application Approved - HMO/Operator 280 Self Erecting Select Actio • 🗸 🏹 |
| | Notice Assigned BROADWAY Tower Crane Select Action: CN00028519 Crane New Approved Expired 280 Self Erecting Amendment ✓ G' |
| | CN00024619 Crane New Approved Expired 280 Self Erecting RNADWAY Tower Crane Print Certificate V C |
| | CN00021919 Crane New Approved Expired 280 Self Erecting BROADWAY Tower Crane |
| Neter | To filter the Course Notices by Course True colort the respective tab (a.e. Colf Freeting |
| Note: | <i>To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane).</i> |
| | Prototype + Grane Device + Grane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit |
| | |
| | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search |
| | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver Protection Pr |
| | |



| | Step | Action | |
|----|------|---|--|
| | | A Confirm pop-up window displays with the messa Confirm you want to submit a notification on CNOC Click Yes to proceed. | |
| 3. | | Confirm Confirm you want to submit a notification on CN0003: Yes No | 1820. |
| | | A New Notification pop-up window displays with the Crane Notice Number | New Notification |
| 4. | | Complete the Notification: | Crane Notice Number CN00023319 Notification Type* Arrival of Device |
| | | Select the Notification Type (e.g., Arrival of Device) Select the Notification Date/Time The selected Date/Time displays above the | Selected Date/Time ✓ October 2019 > Mon Tue Wed Thu Fri Sat Sun 30 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 |
| | | calendar. | 21 22 23 24 25 26 27 28 29 30 31 01 02 03 04 05 06 07 08 09 10 |
| 5. | | | A Notify Cancel |
| | | Below the calendar, click Notify . | |
| | | HH AM | |
| | | Notify Cancel | |



| | Step | Action |
|----|------|---|
| | | A Confirm pop-up window displays with the message: Confirm you want to submit a notification. |
| | | Click Yes to proceed. |
| 6. | | Confirm |
| | | Confirm you want to submit a notification. |
| | | A Notification pop-up window displays with the message: |
| 7. | | Notification has been submitted. |
| | | Click OK to proceed. |
| | | Notification |
| | | Notification has been submitted. |
| - | | You have completed the Notify DOB – Arrival of Device Step-by-Step Guide. |



Self-Erecting Tower Crane CN: Notify DOB – **Assembly of Device**

Complete the following steps to notify DOB on the arrival of Crane Notice:

| | Step | Action |
|----|-------|---|
| | EQUIF | PMENT USER |
| | | From the Dashboard, select the Crane Notices tab. |
| | | + Prototype + Crane Device + Onsite Waiver + Master Rigger Notification + AHV Permit |
| 1. | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| 2. | | Locate the Crane Notice application. Under the Actions column, select Notify DOB . |
| | | Image: Approximate the second seco |
| | | Job Number Notice Type Filling Type Filling Status Crane Notice Status Address Crane Type Actions Filter Filter Filter Filter Filter Filter Filter Filter |
| | | CN00023820 Crane Notice New Approved CN Application Approved - HMO/Operator 280 BROADWAY Self Erecting Tower Crane Select Action V C' CN00028519 Crane Notice New Approved Expired 280 BROADWAY Self Erecting BROADWAY Select Action V C' CN00024619 Crane Notice New Approved Expired 280 BROADWAY Self Erecting Tower Crane BROADWAY Self Erecting Print Certificate V C' |
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane). |
| | | Prototype |
| | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver CRefeeth |
| | | Job Number Notice Type Filing Type Filing Status Crane Notice Status Address Crane Type Actions Filter Filter Filter Filter Filter Filter Filter Filter |



| | Step | Action | | |
|----|------|--|---|--|
| | | A Confirm pop-up window displays with the me Confirm you want to submit a notification on CN Click Yes to proceed. | | |
| 3. | | Confirm Confirm you want to submit a notification on CN00 Yes No | 0031820. | |
| 4. | | A New Notification pop-up window displays with the Crane Notice Number Complete the Notification: | New Notification Crane Notice Number Notification Type* | CN00023319 Assembly of Device |
| | | Select the Notification Type (e.g., Assembly of Device) Select the Notification Date/Time | Selected Date/Time Notification Date/Time :* | Ctober 2019 > Mon Tue Wed Thu Fri Sat Sun 30 01 02 03 04 05 06 |
| 5. | | The selected Date/Time displays above the calendar. | | 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 01 02 03 04 05 06 07 08 09 10 A M HH • • • • • • • • • • • • • • • • • • • |
| | | Below the calendar, click Notify. | | ▲ Notify Cancel |



| | Step | Action |
|----|------|---|
| | | A Confirm pop-up window displays with the message: Confirm you want to submit a notification. |
| | | Click Yes to proceed. |
| 6. | | Confirm |
| | | Confirm you want to submit a notification. |
| | | Yes No |
| | | A Notification pop-up window displays with the message: |
| 7. | | Notification has been submitted. |
| | | Click OK to proceed. |
| | | Notification × |
| | | Notification has been submitted. |
| | | ОК |
| | | You have completed the Notify DOB – Assembly of Device Step-by-Step Guide. |
| | | Continue to the next section. |



Self-Erecting Tower Crane CN: Provide Inspection Results

Complete the following steps to upload the Inspections Results:

| | Step | Action |
|----|-------|---|
| | | From the Dashboard, select the Crane Notices tab. |
| | | + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit |
| 1. | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| Ē | | Locate the Crane Notice application. |
| 2. | | Under the Actions column, select Upload Inspection Results. |
| | | Job Number Notice Type Filing Type Filing Status Crane Notice Status Address Crane Type Actions Filter Filter Filter Filter Filter Filter Filter |
| | | CN00033820 Crane New Approved CN Application Approved - Assembly 280 Self Erecting Tower Crane Select Actio • V Cr |
| | | CN00028519 Crane New Approved Expired 280 Self Erecting Amendment 6 Notice Crane New Approved Expired 280 Self Erecting Create AHV |
| | | CN00024519 Crane Notice New Approved Expired 280 BROADWAY Self Erecting Tower Crane Print Certificate Print Cerificate P |
| - | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane). |
| | | + Prototype + Grane Device + Grane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit |
| | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |



| | Step | Action |
|----|-------|--|
| | | A Confirm pop-up window displays with the message: Confirm you want to upload inspection results for CN00031820. Click Yes to proceed. |
| 3. | | Confirm Confirm you want to upload inspection results for CN00031820. |
| | Note: | The page refreshes and displays the Inspection Documents/Results pop-up window. 1. Filing Information 2. Upload Inspection Results |
| | | Inspection Documents/Results Filing Information Example Crane Notice Number Location Request Number CN00031820-7396 CN00031820 280 BROADWAY, MANHATTAN |
| | | CD8-TR Is CD8-TR is applicable for current phase?* Ves O No Upload Inspection Results Document Name Document Type Document Name |
| | | Select : Select file Upload Document Name Document Type Document Status Actions |
| | | You have begun the process to Upload Inspection Results . Continue to the next section. |



Upload Inspection Results

Complete the following steps to upload the inspection results in the **Documents** tab to support the application:

| | Step | Action | | | | | | | | |
|----|-------|--|--|-------------------------------------|--|--|--|--|--|--|
| | Note: | 1 Year CN Annual Inspection Cou | ntdown Starts when the Inspe | ction Results are submitted: | | | | | | |
| | | CD8 | | | | | | | | |
| | | CD8-TR (if applicable) | | | | | | | | |
| | | CD 8 A/D (if applicable) | | | | | | | | |
| | | Select the applicable radio butto | n for Is CD8-TR is applicable f | or current phase? | | | | | | |
| 1. | | Inspection Documents/Results | | | | | | | | |
| | | Filing Information | | | | | | | | |
| | | Request Number CN00031820-7396 | Crane Notice Number CN00031820 | Location 280 BROADWAY, MANHATTAN | | | | | | |
| | | CD8-TR | | | | | | | | |
| | | Is CD8-TR is applicable for current phase? | Yes No | | | | | | | |
| 2. | | In the Upload Inspection Results Type the Document Name Select the Document Type | | ant Tuna dron down lict | | | | | | |
| | | | Je (e.g., CD8) from the Docum | | | | | | | |
| | | Upload Inspection Results | | | | | | | | |
| | | Document Name [| Document Type | Document Action | | | | | | |
| 3. | | | Select : 🔹 🔻 | Select file Upload | | | | | | |
| | | Click Upload icon (¹) to upload | d the Document Type selected | I. | | | | | | |
| | | Upload Inspection Results | | | | | | | | |
| | | Document Name | Document Type | Document Action | | | | | | |
| | | | Select : | Select file | | | | | | |
| | | | | | | | | | | |



| Step | Action | | | | | | | |
|------|--|---|---|------------------------------------|------------------|-----------------------|--------|--|
| | The Document pop-up window displays. | | | | | | | |
| | | ument and click Op | | | | | | |
| | Open | - | | | | X | | |
| | 😋 🔾 🛡 📗 « 13 Admin | nistration Training Team Tools Form | s PDF Documents to upload in | n filings | ✓ 4 Search | Forms PDF Documents 🔎 | | |
| | Organize 👻 New folde | er | | | | := - 1 📀 | | |
| | E Desktop | Name | Date modified | Туре | Size | | | |
| | Downloads | Fence.docx Flood Zone Restrictive Declaration | 10/3/2017 4:35 PM 8/30/2017 1:31 PM | Adobe Acrobat D Adobe Acrobat D | 155 KB 43 KB | | | |
| | Change Manager | | 10/29/2018 11:13 | Adobe Acrobat D | 291 KB | | | |
| | | Notice to Proceed to Contractor | 9/18/2017 9:29 AM | Adobe Acrobat D | 257 KB | | | |
| | 📜 Libraries | 🔁 OP49 Supporting Document | 11/8/2018 2:00 PM | Adobe Acrobat D | 79 KB | | | |
| | Documents | 🔁 Physical Exam | 10/29/2018 11:11 | Adobe Acrobat D | 475 KB | | | |
| | Music Pictures | ▶ Plan or Sketch ▶ PlansSketch | 8/30/2017 10:56 AM | | 339 KB | | | |
| | Videos | Scaffold | 10/3/2017 4:34 PM | Adobe Acrobat D Adobe Acrobat D | 339 KB 190 KB | | | |
| | | scanola 5 | 10/3/2017 4:34 PM | Adobe Acrobat D | 127 KB | | | |
| | I툎 Computer | 📩 Special Inspector bad upload | 7/11/2017 12:35 PM | Adobe Acrobat D | 165 KB | | | |
| | | 🔁 SSN | 10/29/2018 11:14 | Adobe Acrobat D | 179 KB | | | |
| | | TR1 Design Applicant | 8/30/2017 1:40 PM | Adobe Acrobat D | 636 KB | | | |
| | | TR1 Progress Inspector TR1 Special Inspector | 8/30/2017 2:13 PM 8/30/2017 12:12 PM | Adobe Acrobat D Adobe Acrobat D | 789 KB 589 KB | | | |
| | | Visual | 10/29/2018 11:16 | Adobe Acrobat D | 74 KB | | | |
| | - | | | | | | | |
| | | ame: CD8 | | | - Custom | Files | | |
| | | | | / 1 \ | Open | Cancel | | |
| | | t displays next to the | e upload icon (| (🔹). | Open | Cancel | | |
| | The Document | t displays next to the | e upload icon (| (📤). | Open | Cancel | | |
| | The Document Click Upload . | t displays next to the | | (ᆂ). | | | Action | |
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| | The Document Click Upload . | t displays next to the n Results e Do | cument Type | (ᆂ). | Document | t | Action | |
| | The Document Click Upload . | t displays next to the n Results e Do | | (ᆂ). | Document | t | | |
| | The Document Click Upload . | t displays next to the n Results e Do | cument Type | (📤). | Document | t | | |
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| | The Document Click Upload . | t displays next to the n Results e Do pop-up window disp s been uploaded. | cument Type Select : | | Document | t | | |
| | The Document Click Upload. Upload Inspection Document Name A Notification Document has Click OK to con | t displays next to the | cument Type Select : | message: | Document | t | | |
| | The Document Click Upload. Upload Inspection Document Name A Notification Document has Click OK to con | t displays next to the n Results e Do pop-up window disp s been uploaded. | cument Type Select : | message: | Document | t | | |



| Step | Action | | | | | | |
|-------|---|------------------------------|-------------------------|----------|--|--|--|
| Note: | The Document uploaded displays within the Document table. | | | | | | |
| | Click the edit (${}^{\frown}$) icon to update the Document information. | | | | | | |
| | Click the trash can ($^{ar{	extsf{m}}}$) icon to delete the Document. | | | | | | |
| | Upload Inspection Results | | | | | | |
| | Document Name | Document Type | Document | Action | | | |
| | | Select : | ▼ Select file | 1 Upload | | | |
| | Document Name | Document Type | Document Status | Actions | | | |
| | CD8 | CD8 Inspection | Pending | C i | | | |
| | | | | | | | |
| | At the top-left of the sc | | | | | | |
| | Document Name | CD8 Inspection | Document Status Pending | Actions | | | |
| | | Submit Cano | el | | | | |
| | | vindow displays with the me | ssage: | | | | |
| | Job filing has been subr | nitted. | | | | | |
| | Click OK to continue. | | | | | | |
| | Notification | | × | | | | |
| | Job filing has been submitted. | | | | | | |
| | | UK | | | | | |
| | You have complet | ted the Upload Inspection Re | esults Step-by-Step Gu | iide. | | | |
| | | Continue to the next sec | tion. | | | | |



Self-Erecting Tower Crane CN: Provide Crane Phase Details

Complete the following steps to provide the Crane Phase Details:

| | Step | Action |
|----|-------|---|
| | Note: | This section is only applicable if there is more than 1 Phase specified. |
| | | From the Dashboard, select the Crane Notices tab. |
| 1. | | ★ + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| 2. | | Locate the Crane Notice application. Under the Actions column, select Provide Phase/Jump Details. |
| | | DOB DOB NOW Now Submit Filings, Payments, and Requests to the NYC Department of Buildings Wetcome, IOE ADAM Needer-Heip? Submit Filings, Payments, and Requests to the NYC Department of Buildings Needer-Heip? Sign Out + Prototype + Crane Device + Master Rigger Notification |
| | | |
| | | Job Number v Notice Type v Filing Type v Filing Status V Crane Notice Status V Address v Crane Type v Actions Filter Filter <t< td=""></t<> |
| | | CN00022219 Crane Notice New Approved Approved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane Select Action: Image: Comparison of the second se |
| | | CN00012219 Crane Notice New Pre-filing CN Application - Pre-filing 280 BROADWAY Mobile Crane Notify DO8 Print Certificate CN00016319 Crane Notice New Approved Expired 280 BROADWAY Mobile Crane Renewal |
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane). |
| | | |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver Job Number Notice Type Filing Status ✓ Crane Notice Status ✓ Address ✓ Crane Type ✓ |
| | | Filter Filter Filter Filter Filter Filter Filter |



| Ĩ | Step | Action | | | | | | | |
|----|-------|---|---------------------------------------|---|--------------|---|--|--|--|
| | | A Confirm pop-u | ıp window displays | with the message: | | | | | |
| | | Please confirm if you would like to proceed with providing Phase/Jump details on CN00022219. | | | | | | | |
| | | Click Yes to proc | eed. | | | | | | |
| 3. | | Confirm | | × | | | | | |
| | | Please confirm if you would like to proceed with providing Phase/Jump details on CN00022219. | | | | | | | |
| | Note: | The page refresh | nes and displays the | e Phase & Jump Details Pag | ge. | | | | |
| | | ← Back to CN 🛛 🍽 Save | | | | | | | |
| | | | Phase & Jump Details | | | | | | |
| | | Phase & Jump Details | Filing Information | | | | | | |
| | | Statements & Signatures | Filing Type* | Crane Notice Number* | Crane Type* | | | | |
| | | | Phase/Jump Request | • CN00022219 | Mobile Crane | * | | | |
| | | | | | | | | | |
| | | | Location Information House Number* | Street Name* | Borough* | | | | |
| | | | 280 | BROADWAY | MANHATTAN | * | | | |
| | | | Block* | Lot* | BIN* | | | | |
| | | | 153 | 1 | 1079215 | | | | |
| | | | | | | | | | |
| | | You ł | | cess to Provide Crane Pha Phase & Jump Details sect | | | | | |



Complete Phase & Jump Details

Complete the following steps to provide the Phase & Jump Details to support the application:

| | Step | Action | | | | | | | | |
|----|-------|--|--|--|--|--|--|--|--|--|
| | Note: | The Filing Information and Location Information sections are greyed-out and cannot be edited. | | | | | | | | |
| | | Complete the following Phase and Jump Information: | | | | | | | | |
| | | Enter the Phase Number | | | | | | | | |
| 1. | | Enter the Initial Height | | | | | | | | |
| | | Enter the Proposed Height | | | | | | | | |
| | | Select the applicable radio-button for After Hours Variance Required? | | | | | | | | |
| | | Select the applicable radio-button for Is assembly/disassembly required after the Initial Phase? | | | | | | | | |
| | | Phase and Jump Information Proposed Height* Phase Number* Initial Height* After Hours Variance Required?* Yes No Is assembly/disassembly required after the Initial Phase?* Yes No | | | | | | | | |
| 3. | | | | | | | | | | |
| 5. | | If Yes is selcted for "Is assembly/disassembly required after the Initial Phase?" the following fields display: PGL1 Expiration Date Is Final Disassembly? | | | | | | | | |
| | | After Hours Variance Required?* | | | | | | | | |
| | | Is assembly/disassembly required for this phase?* | | | | | | | | |
| | | PGL1 Expiration Date* | | | | | | | | |
| | | | | | | | | | | |
| | | Is Final Disassembly?* O Yes O No | | | | | | | | |
| | | | | | | | | | | |



| ſ | Step | Action | 1 | | | | | | | | |
|----|-------|---|--------------------------|-------------------------|---------|--------|-------------|-----------|---|--|--|
| | | In the PGL1 Expiration Date section click the calendar to chose the date. | | | | | | | | | |
| | | PGL1 Expiration Date* | | | | | | | | | |
| | | < | | Febr | uary 2 | 2020 | | > | | | |
| | | Mon | Tue | Wed | Thu | Fri | Sat | Sun | | | |
| 4. | | 27 | 28 | 29 | 30 | 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 | 29 | 01 | | | |
| | | 02 | 03 | 04 | 05 | 06 | 07 | 08 | | | |
| | | | | | | | | | | | |
| | Note: | To pro | vide | e the | Not | tifica | atior | n for | Final Dissembly, select Yes. | | |
| | | | | | | | | | | | |
| | | Phase a | e Num | | ormat | lion | | | Initial Height* | | |
| | | 3 | | | | | | | ▼ 600 Feet | | |
| | | After | Hours | Varian | ice Rec | quired | * | | Ves No | | |
| | | ls as | sembly | /disass | embly | requir | ed afte | er the li | nitial Phase?* Yes No | | |
| | | ls Fir | nal Disa | assemb | ly?* | | | | ● Yes ◯ No | | |
| | | lf tho l | Dhar | | Eina | | | omh | | | |
| 5. | | ii the i | Filds | se is i | FIIId | | 0320 | | ly, Inspection Results is not required to be captured. | | |
| | | The A | oplic | ant | of R | eco | rd d | ispla | ys at the bottom of the Phase & Jump Details page. | | |
| | | lf appl | icab | le, cl | lick I | Deta | ails t | o vie | ew the Applicant of Record information. | | |
| | | Applican | t Of Rec | ord: | | | | | | | |
| | | | licant N | | | | | | Applicant Email Applicant License | | |
| | | JO | e ada | M | | | | | AJOETEST@GMAIL.COM PE - 078712 Details | | |
| | | | usiness \& LLC | Name | | | | | Business Address City 123 test JERSEY CITY | | |
| | | S N | tate J | | | | | | Zip Business Telephone 07302 (545) 556-8622 | | |
| | | | ot Availa | elephone able | e | | | | | | |
| | | | | | | | | | | | |



| | Step | Action | | |
|----|------|---|--|--|
| | | At the top-left of the screen, click Save . | | |
| | | ← Back to CN As Save | | |
| 6. | | Phase & Jump Details | | |
| | | Phase & Jump Details Filing Information Statements & Signatures Filing Type* | | |
| | | A Notification pop-up window displays with the message: | | |
| 7. | | Please note that you would not able to provide Jump details on Previous phases from selected | | |
| | | Phase number for crane notice number CN00022219. | | |
| | | The following information cannot be changed after saving : | | |
| | | • Phase Number | | |
| | | Click Save to continue. | | |
| | | Notification | | |
| | | Please note that you would not able to provide Jump details on Previous phases from selected Phase number for crane notice number CN00022219. | | |
| | | The following information cannot be changed after saving : • Phase Number | | |
| 8. | | Save | | |
| | | A Notification pop-up window displays with the message: | | |
| | | Job filing has been saved. | | |
| | | OK to continue. | | |
| | | Notification | | |
| | | Job filing has been saved. | | |
| | | | | |



| Step | Action |
|-------|---|
| Note: | The page refreshes and displays the additional items: |
| | 1. Status Bar |
| | 2. Submit |
| | 3. CN Filing & Jump Number |
| | 4. Additional Tabs: A/D Director Statements & Signatures |
| | 5. Application Information: Application Highlights, History and Fee |
| | Pre-filing Approved |
| | € Back to CN ⊨ Save Submit 2 |
| | CN00023319-J000001 3 hase & Jump Details |
| | AVD Director Filing Type* Crane Notice Number* Crane Type* Statements & Signatures 4 Nonce Nump Request CN00023319 Mobile Crane Crane Concerned Physical Phy |
| | 4 Location Information |
| | You have completed the Phase & Jump Details tab. |
| | Continue to the next section. |



Complete A/D Director Details

Complete the following steps to add the **A/D Director** to support the application:

| | Step | Action | | | |
|----|-------|--|---|--|--|
| | EQUIP | MENT USER | | | |
| 1. | | Type the Select th Select th | Email and then select th e License Type (e.g., Pre j e Rigger Type (e.g., Mas | er the A/D Director inform the Email Address from the parer) from the License T ter Rigger) from the Rigg the Business Name drop-d | e blue-drop down Type drop-down list ger Type drop-down list |
| | | CN00023319-J000001 Phase & Jump Details A/D Director Statements & Signatures | A/D Director Details Email* AJOETEST3@GMAILCO AIOETEST3@GMAILCOM Select: • Select: • State Mobile Telephone | Last Name License Number Business Address Zip Code | First Name Rigger Type* Select Rigger Type: City Business Telephone |
| | Note: | Zip Code, Busine | | Name, First Name, Busin lephone are greyed-out a | |
| | | General Information Prototype & Phase Information Assign CD to CN A/D Director Documents Statements & Signatures | A/D Director Information Email* License Type* Select: Business Name* Select: State Mobile Telephone | Last Name License Number Business Address Zip Code | First Name Rigger Type* Select: City Business Telephone |



| | Step | Action | | |
|----|-------|--|--|--|
| | | At the top-left of the screen, click Save . | | |
| | | ← Back to CN P Save Submit | | |
| 2. | | CN00023319-J000001 A/D Director Details | | |
| 2. | | Phase & Jump Details Email* A/D Director AJOETEST3@GMAILCOM | | |
| | | A Notification pop-up window displays with the message: | | |
| 3. | | Job filing has been saved. Click OK to continue. | | |
| | | Notification × | | |
| | | Job filing has been saved. | | |
| | | ΟΚ | | |
| | A/D D | DIRECTOR | | |
| 4. | Note: | The A/D Director must attest before the Equipment User. | | |
| | | Locate the Crane Notice application. Under the Actions column, select View Phase/Jump Details. | | |
| | | Prototype Cane Device Cane Notice Ally Permits | | |
| | | My Prototypes My Crane Devices My Crane Notices My Rigger Notifications My AHV Work Permits Search All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | |
| | | Job Number Notice Type Filling Type Filling Status Crane Notice Status Address Crane Type Actions Filter | | |
| | | CN00023319 Crane Notice New Approved Approved for Use - Inspection Results Captured 280 BROADWAY Mobile Crane CN00022319 Crane Notice New Approved Expired 280 BROADWAY Dedicated Pile Select Action: Sel | | |
| | | Driver Driver Approved CN00022219 Crane Notice New Approved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane Print Certificate Results Captured CN00022219 Crane Notice New Approved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane Print Certificate Renewal CN00022219 Crane Notice New Approved Entities Renewal | | |
| | | Cross2019 Calle Holice Hell Approved Experted Experted Experted Select Action: • | | |



| | Step | Action | |
|----|-------|--|--|
| - | | | s and displays the Crane Notice application with the notification " Please nt phase information." |
| | | Double-click the P | hase to display the Phase Details. |
| 5. | | Pre-filing | Pending QA Assignment Pending QA Admin Review Pending PE Assignment PE Review in Process Approved |
| | | | |
| | | CN00023319 P General Information | Phase Details In Progress + Add Request In Progress |
| | | Prototype & Phase Information Assign CD to CN | Tracking No. · Phase Number · Current Filing Status · Device Installer · Created On · Actions · |
| | | Lift Director HMO(s) | CN00023319-J000001 P2 Pre-filing ADAM JOE 10/8/2019 Select Action: • |
| - | | The Phase & Jump | Details display |
| 6. | | Select the A/D Dir | |
| | | Pre-filing | |
| | | ← Back to CN 🗎 Save | Submit |
| | | CN00023319-J000001 | A/D Director Details |
| | | Phase & Jump Details A/D Director | Email* Last Name AJOETEST3@GMAILCOM JOE |
| | | Statements & Signatures | License Type* License Number 023104 |
| - | Note: | The statement ap | plicable to the stakeholder that's logged in highlights in blue. |
| | | A/D Director's Statement* | |
| | | Administrative Code and D I have reviewed the inform made to the Department is | ranted a license/registration and/or qualification from the New York City Department of Buildings, 1 attest that I comply with all New York City epartment rules, regulations, and directives governing how licensees/ registrants/qualification holders conduct their specific trade. ation provided in this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any statement 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 orming the job or in exchange for special consideration. Such actions are punishable by imprisonment, fine and/or loss of license/registration and/or |
| | | I understand and agree that | t 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 re shall have the same validity and effect as a signature affixed by hand. |
| | | Name | Date |
| | | Save | |



| | Step | Action |
|----|------|---|
| Ī | | Click the A/D Director's Statement checkbox to electronically attest. |
| | | The Name and Date field's auto-populate by the system. |
| 7. | | A/D Director's Statement* 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 gratiuty 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. I Inderstand 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 |
| | | Name Date |
| | | ADAM JOE 10/08/2019 (Electronically Signed) |
| - | | |
| | | Below the Name and Date fields, click Save. |
| 8. | | A/D Director's Statement* 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. 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 ADAM JOE 10/08/2019 |
| | | (Electronically Signed) |
| 9. | | |
| | | A Notification pop-up window displays with the message: |
| | | Job filing has been saved. |
| | | Click OK to continue. |
| | | Notification |
| | | Job filing has been saved. |
| | | ОК |



| | Step | Action | | |
|----|-------|---|--|--|
| | EQUIF | PMENT USER | | |
| | Note: | The statement applicable to the stakeholder that's logged in highlights in blue. | | |
| | | Equipment User's Statement* 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 are 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. 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 | | |
| - | | Click the Equipment User's Statement checkbox to electronically attest. | | |
| LO | | The Name and Date field's auto-populate by the system. | | |
| | | Equipment User's Statement* 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/ registratis/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 faisification 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. 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 is electronic signature shall have the same validity and effect as a signature affixed by hand. | | |
| | | Name Date ADAM JOE2 10/08/2019 (Electronically Signed) 10/08/2019 | | |
| 11 | | At the top-left of the screen, click Save . | | |
| | | ← Back to CN P Save Submit | | |
| L2 | | CN00023319-J000001 A/D Director Details | | |
| - | | A Notification pop-up window displays with the message: Job filing has been saved. Click OK to continue. | | |
| | | Notification × Job filing has been saved. | | |



| Step | Action |
|------|--|
| | You have completed the Assign A/D Director Tab Step-by-Step Guide. |
| | Continue to the next section. |



Complete Statements & Signatures

Complete the following steps to complete the attestations in the Statement & Signatures tab:

| | Step | Action |
|----|-------|--|
| | APPLI | CANT OF RECORD |
| | | From the Dashboard, select the Crane Notices tab. |
| 1. | | |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| 2. | | Locate the Crane Notice application. Under the Actions column, select Provide Phase/Jump Details. |
| | | D08 DOB NOW Submit Filings, Payments, and Requests to the NYC Department of Buildings NeedHis IbULD + Prototype + Crane Device + Muster Rigger Notification + AHV Permits |
| | | My Prototypes My Crane Devices My Rigger Notifications My AHV Work Permits Search All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derick Dedicated Pile Driver Change Vec Job Number v Notice Type v Filling Type v Filling Status v Crane Notice Status v Address v Crane Type v Actions |
| | | Filter Filter Filter Filter Filter Filter Filter CN00023319 Crane Notice New Approved for Use - Inspection Results Captured 280 BROADWAY Mobile Crane CN00022319 Crane Notice New Approved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane CN0002219 Crane Notice New Approved Reproved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane CN0002219 Crane Notice New Approved Expired 280 BROADWAY Mobile Crane CN0002219 Crane Notice New Approved Expired 280 BROADWAY Mobile Crane CN0002219 Crane Notice New Approved Expired 280 BROADWAY Mobile Crane |
| 3. | | CN00020219 Crane Notice New Approved Expired 280 BROADWAY Mobile Crane Amendment CN00012219 Crane Notice New Pre-filing CN Application - Pre-filing 280 BROADWAY Mobile Crane Notify DOB CN00015319 Crane Notice New Approved Expired 280 BROADWAY Mobile Crane Expired |
| | | The page refreshes and displays the Crane Notice application with the notification " <i>Please provide subsequent phase information</i> ." Double-click the Phase to display the Phase Details. |
| | | Pre-filing Pending QA Assignment Pending QA Admin Review Pending PE Assignment PE Review in Process Approved H Save Submit Image: Construction in the subsequent phase information Image: Construction in the subsequent phase information Image: Construction in the subsequent phase information |
| | | CN00023319 Phase Details In Progress General Information Add Request Prototype & Phase Information Assign CD to CN Lift Director Lift |
| | | Assign CD to CN |



| ĺ | Step | Action | |
|----|------|--|--|
| | | Upload Certificate of insu | rance (PGL1). Click the +Add Document button. |
| | | CN00033820- J000001 | Required Documents |
| 4. | | Phase Details | + Add Document |
| | | A/D Director | Document Name |
| | | Documents | |
| | | The Upload Document po | op-up window displays. |
| 5. | | Type the Docume Select the Docum Type drop-down l | ent Type (e.g., Certificate of insurance (PGL1)) from the Document |
| | | See Upload Documents se | ection fo the Step by Step. |
| | | Upload Document | |
| | | Document Name* | |
| | | Document Type* Select: | |
| | | Document Choose File No file chosen | |
| c | | Upload | Cancel |
| 6. | | | |
| | | The Phase & Jump Details | |
| | | Select the Statement & Si | - |
| | | ← Back to CN 🏼 Save 📑 Su | bmit |
| | | | Statements & Signatures |
| | | Phase & Jump Details A/D Director | Applicant's Statement |
| | | Statements & Signatures | As a condition of being granted a license/registration Administrative Code and Department rules, regulations, . I have reviewed the information provided in this applica |
| | | | |



| | Step | Action |
|----|------|---|
| | | Click the Applicant's Statement checkbox to electronically attest. The Name and Date field's auto-populate by the system. |
| | | 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. |
| 7. | | Name Date JOE ADAM 09/19/2019 (Electronically Signed) 09/19/2019 |
| | | At the top-left of the screen, click Save . |
| 8. | | Pre-filing |
| | | CN00023319-J000001 Statements & Signatures |
| 9. | | A Notification pop-up window displays with the message: Job filing has been saved. Click OK to continue. |
| | | Notification × |
| | | Job filing has been saved. |
| • | You | have completed the Crane Phase Details: Statements & Signatures Tab Step-by-Step Guide. Continue to the next section. |



Pay Fees

Complete the following steps to submit a payment application to the NYC Department of Buildings.

| | Step | Action |
|----|-------|--|
| | Note: | The job filing's fees must be paid before continuing to Preview to File. |
| | | At the bottom-right of the screen, click Pay Now . |
| 1. | | Approved Dashboard |
| | | y with all New York City trade. ification of any statement ary or otherwise, either as cense/registration and/or |
| 2. | | The Payment Confirmation pop-up window displays with the message: |
| | | Are you sure you want to make a payment now for \$100.00? |
| | | Payment is not the last step. Click the Preview to File/Submit button at the top of the screen to submit the application. |
| | | Please confirm that your pop-up blocker is turned off before proceeding to Payment. |
| | | Click Yes , to proceed. |
| | | Payment Confirmation |
| | | Are you sure you want to make a payment now for \$100.00 ? |
| | | Payment is not the last step. Click the Preview to File/Submit button at the top of the screen to submit the application. |
| | | Please confirm that your pop-up blocker is turned off before proceeding to Payment. |
| | | Yes No |



| | Step | Action |
|----|------|--|
| | | The page is redirected to NYC City Pay. Pay the application fees via eCheck or Credit Card by selecting the applicable tab. |
| 3. | | Enter Payment Details 1. Select Items 2. Enter Payment 3. Review and Pay Payment Amount: \$2,000.00 echeck Credit Card |
| | | C & D: APPLICATION AMENDMENT DOB NOW Build Prototype : CP00001582-0A000003 : Amendment Crane Prototype \$2,000.00 |
| | | Billing Information First Name * Last Name * |
| | | Country * United States * |
| 4. | | The Notification pop-up window displays on the DOB NOW page with the message: Payment processed succesfully. Click OK to proceed. |
| | | Payment processed successfully. |
| | | You have completed the Pay Fees section. |
| | | Continue to the next section. |



Submit Phase Details

Complete the following steps to submit the application to the NYC Department of Buildings.

| | Step | Action |
|----|-------|--|
| | APPLI | CANT OF RECORD |
| | | At the top-left of the screen, click Submit . |
| 1. | | Pre-filing |
| | | ← Back to CN 🎽 Submit |
| | | CN00023319-J000001 Statements & Signatures |
| 2. | | A Confirm pop-up window displays with the message: Please confirm if you would like to proceed with Submit application to DOB. Click Yes to proceed. |
| 3. | | Confirm × Please confirm if you would like to proceed with Submit application to DOB. Yes No |
| | | A Notification pop-up window displays with the message: Job filing submitted successfully. Information forwarded to DOB. Click OK to proceed. |
| | | Notification × Job filing submitted successfully. Information forwarded to DOB. |



| | Step | Action | |
|----|-------|--|--|
| | | The Status Bar u | pdates to Approved. |
| 4. | | Pre-filir t Back to CN | Approved ► Submit |
| | Note: | A green tick (✔) | hover the mouse over In Progress to view the upcoming Phase task(s). symbolizes that the task is completed. |
| | | H Save Is submit CN00023319 General Information Prototype & Phase Information Assign CD to CN Lift Director HMO(s) Documents Phase Details Equipment User(s) Statements & Signatures | Phase Details Phase Number Current Filing Status Device Installer CN000023319-J000001 P2 Approved ADAM JOE 10/8/2019 P2 Page Page Page Page Page Page Page Page |
| | | You have | e completed the Submit Phase Details Step-by-Step Guide. Continue to the next section. |



Self-Erecting Tower Crane CN: Notify DOB of Assembly/Disassembly

Complete the following steps to provide the Crane Phase Details:

| | Step | Action |
|----|-------|--|
| | | From the Dashboard, select the Crane Notices tab. |
| | | |
| 1. | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| | | Locate the Crane Notice application. |
| 2. | | Under the Actions column, select View Phase/Jump Details. |
| | | Potobype Crane Device • Orable Walver • Master Rigger Notification • APV Permit |
| | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications: AHV Work Permits Search |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| | | Job Number V Notice Type Filling Type V Filling Status V Crane Notice Status V Address V Crane Type V Actions |
| | | CN00033820 Crane New Approved Approved for Use - Subsequent Phase Initiated BROADWAY Self Erecting Select Actio • • • |
| | | CN00033020 Crane New Approved CN Application - Approved 350 5 AVENUE Self Erecting Additional Inspection Results Notice Tower Crane Amendment |
| | | CN00027519- Crane Update Pre-filing CN Application - Approved 280 Self Erecting Tower Crane APV Print Certificate APV Print Certificate Renewal |
| | | CN000011920 Crane New Pre-filing CN Application - Pre-filing 350 5 AVENUE Self Freeting View Phase-Jump Details |
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane). |
| | | Frototype Gane Device Cane Notice Cane Notice Anne Notice |
| | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| | | Job Number Notice Type Filing Type Filing Status Crane Notice Status Address Crane Type Actions Filter Filter Filter Filter Filter Filter Filter |
| | | Filter Filter Filter Filter Filter |



| Step | Action | | | | | |
|-------|-------------------------------|-----------------------|-----------------------------|----------------------------------|----------------------|------------------|
| Note: | The page refresh | es and displays | the Crane Noti | ce Application: I | Phase Details ta | b. |
| | Pre-filing | Pending QA Assignment | Pending QA Admin Review | Pending PE Assignment | PE Review in Process | Approved |
| | 🍽 Save 📄 Submit | | | | | ■ Notify DO |
| | CN00023319 | Phase Details | | | | In Progr |
| | General Information | + Add Request | | | | |
| | Prototype & Phase Information | | Phase Number V Current Fill | ng Status V Device Ins | taller | Actions |
| | Assign CD to CN | | | | | |
| | Lift Director | CN00023319-J000001 | 2 Approved | ADAM JOE | 10/8/2019 | Select Action: • |
| | HMO(s) | | | | | |
| | Documents | | | | | |
| | Phase Details | | | | | |
| | Equipment User(s) | | | | | |
| | Statements & Signatures | | | | | |
| | | | | DOB of Assembl Jump to DOB se | | |



Complete Notify Jump to DOB section

Complete the following steps to notify DOB of the Jump Details:

| | Step | Action |
|----|------|--|
| | | Locate the applicable phase and select Notify DOB from the Action drop-down list. Click Notify DOB . |
| 1. | | Phase Details In Progress |
| | | Tracking No. Phase Numb.r. Current Filing Status A/D Director Created On Payment Status Actions CN00033820-J000001 P2 Approved ELV DIRECTOR 2/5/2020 No Fee Select Action: |
| | | A Confirm pop-up window displays with the message: |
| 2. | | Confirm you want to submit a notification for P2. Click Yes , to proceed. |
| | | Confirm Confirm you want to submit a notification for P2. |
| | | Yes No |



| | | A New Notification displays with the Cr | | New Notification | |
|----|-------|---|--|--|---|
| | | | | Crane Notice Number | CN00023319-J000001 |
| | | Complete the Notifi | cation: | Notification Type* | Assembly of Device • |
| | | Select the N Assembly o | lotification Type (e.g., f Device) | Selected Date/Time Notification Date/Time :* | 10-14-2019 8:00 AM |
| 3. | | | lotification Date/Time | | Mon Tue Wed Thu Fri Sat Sun |
| | | | Time displays above the | | 30 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 29 30 31 01 02 03 04 05 06 07 08 09 10 |
| | | | | | 00 AM |
| | | | | | A Notify Cancel |
| | Note: | For Final Disassemb | ly of Device, select Disasse | embly of Device | e. |
| | | New Notification | | | |
| | | Crane Notice Number | CN00023319-J000002 | | |
| | | Notification Type* | Select Notification Type: | * | |
| | | Selected Date/Time | Select Notification Type: Assembly of Device Disassembly of Device | | |
| | | Notification Date/Time :* | Cctober 2019 | > | |
| 4. | | | Mon Tue Wed Thu Fri Sat S | un | |
| | | Below the calendar, | , click Notify . | | |
| | | | HH | | |
| | | | A Notify | | |



| | | A Confirm pop-up window displays with the message: |
|----|-------|--|
| | | Confirm you want to submit a notification. |
| | | Click Yes to proceed. |
| | | Confirm |
| 5. | | |
| | | Confirm you want to submit a notification. |
| | | Yes No |
| | | A Notification pop-up window displays with the message: |
| | | Notification has been submitted. |
| 5. | | Click OK to proceed. |
| | | Notification × |
| | | Notification has been submitted. |
| | | ОК |
| ľ | Note: | The page refreshes and displays the additional items: |
| | | 1. The Status Bar moves to Approved |
| | | 2. The Inspection Documents tab displays |
| | | |
| | | Pre-filing Approved |
| | | |
| | | CN00023319-J000001 Phase & Jump Details Phase & Jump Details Filing Information Filing Information |
| | | A/D Director 2 Filing Type* Crane Notice Number* Crane Type* Inspection Documents ① Phase/lump Request CN00023319 Mobile Crane |
| | | Statements & Signatures Location Information |
| - | | You have completed the Notify DOB – Assembly/Disassembly Step-by-Step Guide. |
| | | Continue to the next section. |
| | | |



Self-Erecting Tower Crane CN: Notify DOB - Final Disassembly Notification

Complete the following steps to provide the Crane Phase Details:

| | Step | Action |
|----|-------|---|
| | | From the Dashboard, select the Crane Notices tab. |
| | | ★ + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit |
| 1. | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| | | Locate the Crane Notice application. |
| 2. | | Under the Actions column, select Notify DOB. |
| | | If the option does not display, review the Phase Details steps for <u>Self Erecting Tower Crane</u> <u>CN: Notify DOB of Assembly/Disassembly section</u> . |
| | | Crane Devices Crane Notice Crane Notice Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search All Tower Crane Self Erecting Tower Crane Mobile M |
| | | Job Number Notice Type Filing Type × Filing Status × Crane Notice Status × Address × Crane Type × Actions |
| | | CN00033820 Crane Notice New Approved Approved for Use - Subsequent Phase 280 BROADWAY Self Erecting Tower Crane Select Actio Color CN00033020 Crane Notice New Approved CN Application - Approved 350 5 AVENUE Self Trecting Tower Crane Select Action: Additional Inspection Results |
| | | Notice Iower Cane Iower Cane Amendment CN00027519- A00002 Crace Pre-filing CN Application - Approved 280 BROADWAY Self Erecting Drewer Cane Create AHV CN00027519- A00002 Notice Pre-filing CN Application - Approved 280 BROADWAY Self Erecting Drewer Cane Pre-filing CN0002710- CN00020 Form Pre-filing CN Application - Approved 250 E AVENUE Form Print Certificate |
| - | | CANDOLINIA CANDE New Pre-Blina CN Application - Pre-Blina 350 S AVENUE Self Fractina NOPOWAL |
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane). |
| | | + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AFIV Permit |
| | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |



| | Step | Action | | |
|----|------|--|--|--|
| 3. | Step | A Confirm pop-up window displays with th Confirm you want to submit a notification of Click Yes to proceed. Confirm Confirm | on CN00033820 | |
| 4. | | A New Notification pop-up window displays with the Crane Notice Number and Notification Type. Complete the Notification: <i>Select the Notification</i> <i>Date/Time</i> The selected Date/Time displays above the calendar. | New Notification Crane Notice Number Notification Type* Selected Date/Time Notification Date/Time :* | CN00023319 Solution Disassembly October 2019 Mon Tue Wed Thu Fri Sat Sun 30 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 29 30 31 01 02 03 04 05 06 07 08 09 10 MM AM |
| 5. | | | | ✓ ✓ ✓ ✓ Notify Cancel |
| | | Below the calendar, click Notify. | | |



| | Step | Action |
|----|---------|--|
| | | A Confirm pop-up window displays with the message: Confirm you want to submit a notification. |
| | | Click Yes to proceed. |
| 6. | | Confirm |
| | | Confirm you want to submit a notification. |
| | | |
| | | A Notification pop-up window displays with the message: |
| 7. | | Notification has been submitted. |
| | | Click OK to proceed. |
| | | Notification × |
| | | Notification has been submitted. |
| | | OK |
| | You hav | ve completed the Self Erecting Tower Crane CN: Final Disassembly Notification Step-by-Step Guide. |



Self-Erecting Tower Crane CN: Notify DOB -Departure of Device

Complete the following steps to notify DOB on the arrival of Crane Notice:

| Step | Action |
|-------|--|
| | From the Dashboard, select the Crane Notices tab. |
| | ★ + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit |
| | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications |
| | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| | Locate the Crane Notice application. |
| | Under the Actions column, select Notify DOB . |
| | Job Number Notice Type Filing Type Filing Status Crane Notice Status Address Crane Type Actions Filter Filter Filter Filter Filter Filter Filter Filter Filter |
| | CN00033820 Crane New Approved CN Application Approved - Final Disassembly 280 Self Erecting BROADWAY Self Erecting Compared - Final Disassembly 280 Self Action - Compared - Final Disassembly 280 Select Action - Compared - Final Disas |
| | CN00033020 Crane New Approved CN Application - Approved 350 5 AVENUE Self Erecting Additional Inspection Results Tower Create Amendment CN00027519- Crane Update Pre-filing CN Application - Approved 280 Self Erecting Create AHV |
| | A00002 Notice PGL-1 BROADWAY Tower Crane Notify DOB Insurance Cuprosition Of Character Print Certificate Cuprosition Of Character Print Certificate Renewal Character Print Certificate Renewal Character Print Pr |
| Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self-Erecting Tower Crane). |
| | ↑ + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit |
| | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications AHV Work Permits Search |
| | All Tower Crane Self Erecting Tower Crane Mobile Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver |
| | |
| | A Confirm pop-up window displays with the message: |
| | Confirm you want to submit a notification on CN00033820. |
| | Click Yes to proceed. |
| | Confirm |
| | Confirm you want to submit a notification on CN00033820. |
| | Yes No |
| | |
| | |



| | Step | Action | | | | | |
|----|------|--|---|--|--|--|--|
| | | A New Notification pop-up window displays with the Crane Notice Number | New Notification Crane Notice Number CN00023319 | | | | |
| | | Complete the Notification: | Notification Type* | CN00023319 Final Departure of Device | | | |
| 4. | | Select the Notification Type (e.g., Final Departure of Device) Select the Notification Date/Time | Selected Date/Time Notification Date/Time :* | Cotober 2019 > Mon Tue Wed Thu Fri Sat Sun | | | |
| | | The selected Date/Time displays above the calendar. | | 30 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 29 30 31 01 02 03 04 05 06 07 08 09 10 MMM AM \vert V \vert V \vert V | | | |
| 5. | | Below the calendar, click Notify . | | | | | |
| 6. | | HH : MM AM | | | | | |
| | | A Confirm pop-up window displays with the Confirm you want to submit a notification. Click Yes to proceed. | e message: | | | | |
| | | Confirm Confirm you want to submit a notification. Yes No | | | | | |



| ſ | Step | Action |
|----|--------|---|
| | | A Notification pop-up window displays with the message: Notification has been submitted. Click OK to proceed. |
| 7. | | Notification has been submitted. |
| | | You have completed the Notify DOB – Departure of Device Step-by-Step Guide. |
| | | re completed the DOB NOW: <i>Build</i> – Cranes & Derricks: Self Erecting Tower Crane – CD & CN tions Step-by-Step Guide. |
| | For mo | re resources visit: |
| | | YouTube Channel: DOB NOW |
| | | Step-by-Step Guides and Manual: nyc.gov/dobnowinfo |
| | | Customer Service: nyc.gov/dobnowhelp |



OPTIONAL: Self Erecting Tower Crane CN: Request New Equipment User(s)

Complete the following steps if applicable to request additional Equipment Users:

| 7 | Step | Action | | | | | | |
|----|--|---|--|--|--|--|--|--|
| | Note: | The newly added Equipment User must assign their Lift Directors. All stakeholders must complete attestations. | | | | | | |
| | From the Dashboard, select the Crane Notices tab. | | | | | | | |
| 1. | | + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit | | | | | | |
| 1. | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | | | | | |
| 2. | | Locate the Crane Notice application. Double-click to view the details. | | | | | | |
| | | Image: | | | | | | |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver Crane Notice Type v Filing Type v Filing Status Crane Notice Status Address Crane Type v Actions Job Number v Notice Type v Filing Status Crane Notice Status Address Crane Type v Actions Filter Filter Filter Filter Filter Filter Filter Filter Filter CN00023319 Crane Notice New Approved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane Catent Antions | | | | | | |
| | | CN00022339 Crane Notice New Approved Approved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane Select Action: CN00022239 Crane Notice New Approved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane Select Action: • CN00022239 Crane Notice New Approved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane Select Action: • CN00022239 Crane Notice New Approved for Use - Subsequent phase Inspection 280 BROADWAY Mobile Crane Select Action: • | | | | | | |
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self Erecting Tower Crane). | | | | | | |
| | | + Prototype + Crane Device + Master Rigger Notification + AHV Permits | | | | | | |
| | | My Prototypes My Crane Devices My Crane Notices My Rigger Notifications My AHV Work Permits Search | | | | | | |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | | | | | |
| | | Job Number Notice Type Filing Type Filing Status Crane Notice Status Filter Filter Filter Filter Filter | | | | | | |
| | | | | | | | | |



| | Step | Action | | | | | |
|----|-------|---|---------------------------------------|-------------------------------------|---|---------------------------|----------|
| | | A Crane Notice In | formation pop-up | o window di | splays with the m | essage: | |
| | | Job Number: CN0 | 0023319 | | | | |
| | | Filing Type: Crane | Notice | | | | |
| | | | | 200 | | | |
| 3. | | Crane Type: Self E | - | ane | | | |
| | | Click OK to procee | ed. | | | | |
| | | Crane Notice Infor | mation | | | | |
| | | Job Number: CN000 Filing Type: Crane N Crane Type: Mobile (| lotice | | | | |
| | | | | OK Cancel | | | |
| | Note: | The page refreshe highlighted (e.g., I | | e Crane Not | ice Application an | d the current task ta | ıb is |
| | | Pre-filing | Pending QA Assignment | Pending QA Admin Revi | ew Pending PE Assignment | PE Review in Process | Approved |
| | | 🗎 Save 📔 Submit | | rovide subsequent phas | | × | |
| | | CN00023319 | General Information | | | | |
| | | General Information | Filing Information | | | | |
| | | Prototype & Phase Information | Crane Notice Type* | • | Filing Type* | Crane Type* Mobile Crane | |
| | | Assign CD to CN | | | | | |
| | | Lift Director | Location Information House Number* | | Street Name* | Borough* | |
| | | HMO(s) | 280 | | BROADWAY | MANHATTAN | |
| | | Documents | Block* | | Lot* | BIN* | |
| | | Phase Details | 153 | | 1 | 1079215 | |
| | | Equipment User(s) | | | | | |
| | | Statements & Signatures | Owner Type* | ¥ | Associated BIS/DOB NOW Job Number 185007226 66 characters remaining | (Max 5)* | |
| | | | | | | | |
| | | You have | | ess to Reque e to the nex | st New Equipmer It section. | nt User(s). | |



Add Request

Complete the following steps to upload the inspection results in the Documents Tab to support the application:

| | Step | Action |
|----|-------|--|
| | | Select the Equipment User(s) tab to display the Additional Equipment User(s) section. |
| | | Pre-filing Pending QA Assignment Pending QA Admin Review Pending PE Assignment PE Review in Process Approved |
| 1. | | E Notify DOB • |
| | | CN00023319 Additional Equipment User(s) 2 |
| | | October Minimutation Associated Equipment User(s) Prototype & Phase Information Request New Equipment user(s) Assign CD to CN Image: Comparison of the second secon |
| | | Lift Director + Add Request |
| | | HMO(s) Request Number Request Status Total users Request Fee(\$) Payment Status Created Date + Documents |
| | | Phase Details Equipment User(s) 1 |
| | | Statements & Signatures |
| 2. | | |
| | | Select the +Add Request button |
| | | Additional Equipment User(s) |
| | | Associated Equipment User(s) |
| | | Request New Equipment user(s) |
| | | + Add Request |
| | | Request Number Request Status Created Date - |
| | | |
| Ī | Note: | The page refreshes and displays the Equipment User: General Information tab. |
| | | ← Back to CN H Save |
| | | General Information |
| | | General Information Filing Information Statements & Signatures Filing Type* Crane Notice Number* Crane Type* New Equipment User(s) CN00023319 Mobile Crane • |
| | | Location Information House Number* Street Name* Borough* |
| | | 280 BROADWAY MANHATTAN * |



| | Action | | | | |
|-------|--------------------------------|--|-------------------|-------------------------------------|--------|
| Note: | The Filing Information edited. | n and Location Informat | tion sections are | greyed-out and can | not be |
| | General Information | | | | |
| | Filing Information | | | | |
| | Filing Type* | Crane Notice Number* | | Crane Type* | |
| | New Equipment User(s) | ▼ CN00023319 | | Mobile Crane | • |
| | Location Information | | | | |
| | House Number* | Street Name* | | Borough* | |
| | 280 | BROADWAY | | MANHATTAN | * |
| | Block* | Lot* | Lot* | | |
| | 153 | 1 | | 1079215 | |
| | | | | | |
| | In the Equipment Use | er(s) Information, click | FAdd Equipment | User. | |
| | In the Equipment Use | Location Information | | | |
| | | Location Information House Number* | S | treet Name* | |
| | General Information | Location Information | S | | |
| | | Location Information House Number* | S | treet Name* | |
| | General Information | Location Information House Number* 280 | S | treet Name* BROADWAY | |
| | General Information | Location Information House Number* 280 Block* | S | treet Name* BROADWAY Dt* | |
| | General Information | Location Information House Number* 280 Block* 153 | S | treet Name* BROADWAY Dt* | |
| | General Information | Location Information House Number* 280 Block* 153 Equipment User(s) Information | S | treet Name* BROADWAY Dt* | Busi |
| | General Information | Location Information House Number* 280 Block* 153 Equipment User(s) Information | S La | treet Name* BROADWAY Dt* 1 | Busi |



| | Step | Action | | | | | | | |
|----|--------------------------|---|---|---|--|--|--|--|--|
| | | The Equipment User Details | pop-up window displays. | | | | | | |
| | | Type the Email and then select the Email Address from the blue-drop down. | | | | | | | |
| | | Select the License Type (e.g. Professional Engineer) | | | | | | | |
| | Select the Business Name | | | | | | | | |
| 4. | Equipment User Details | | | | | | | | |
| | | Email* | Last Name | First Name | | | | | |
| | | DOBTESTING456@GMAIL.C | | | | | | | |
| | | DOBTESTING456@GMAIL.COM | License Number* | Business Name* | | | | | |
| | | Select: | | Select: | | | | | |
| | | Business Name | Business Address | City | | | | | |
| | | State | Zip Code | Business Telephone | | | | | |
| | | | | | | | | | |
| | | Mobile Telephone | | | | | | | |
| | | | | | | | | | |
| - | | | | | | | | | |
| 5. | | Click Save. | | | | | | | |
| | | I understand and agree that by personally of its terms. I understand that this electronic | licking on the box at left I am electronically signi c signature shall have the same validity and effect | ng this application and expressing my agreement with all as a signature affixed by hand. | | | | | |
| | | Name | Date | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | Save Save | | | | | | |
| | | | | | | | | | |
| Ī | Note: | The Equipment User added d | isplays within the Equipmen | t User(s) information table. | | | | | |
| | | Click the edit (${ar {S}}$) icon to up | | | | | | | |
| | | - | | | | | | | |
| | | Click the trash can (🛄) icon t | o delete the Equipment Use | r. | | | | | |
| | | Equipment User(s) Information | | | | | | | |
| | | + Add Equipment User | | | | | | | |
| | | First Name Last Name TESTING DOB | Email Busine DOBTESTING456@GMAIL.CO TESTING LLC | ss Name Identified Edit Delete | | | | | |
| | | | | | | | | | |



| Ste | ер | Action | | | | | |
|-----|-----|--|--|--|--|--|--|
| Not | te: | Click the Details button to display the Applicant of Record or Equipment User details. | | | | | |
| | | Applicant Of Record | | | | | |
| | | Applicant Name Applicant Email Applicant License JOE ADAM AJOETEST@GMAIL.COM PE - 078712 | | | | | |
| | | Equipment User | | | | | |
| | | Equipment User Name Equipment User Email Equipment User License ADAM JOE2 Equipment User Email Equipment User Email | | | | | |
| | | | | | | | |
| | | At the top-left of the screen, click Save . | | | | | |
| 6. | | ← Back to CN Save | | | | | |
| | | General Information | | | | | |
| | | General Information Filing Information | | | | | |
| | | Statements & Signatures Filing Type* New Equipment User(s) | | | | | |
| 7. | | A Notification pop-up window displays with the message: | | | | | |
| | | Are you sure you want to continue with adding more equipment users on following crane notice number. Please verify before saving: | | | | | |
| | | • (e.g., CN00023319) | | | | | |
| | | Click Save to continue. | | | | | |
| | | Notification | | | | | |
| | | Are you sure you want to continue with adding more equipment users on following crane notice number. Please verify before saving: • CN00023319 | | | | | |
| | | Save | | | | | |



| ſ | Step | Action | | | | | |
|----|------|--|--|--|--|--|--|
| | | A Notification pop-up window displays with the message: Job filing has been saved. Click OK to continue. | | | | | |
| 8. | | Notification × Job filing has been saved. | | | | | |
| 9. | | The page refreshes and displays the additional items: Status Bar Crane Notice Filing Number Additional Tabs: Prototype & Phase Information, Document and Statements & Signatures Application Information: Application Highlights, View Filing, History and Fee | | | | | |
| | | Pre-filing Approved 1 Image: Constraint of the Statement S& Signatures Statement S& Signatures Statement S& Signatures Image: Constraint of Street Name* Crane Notice Number* Crane Type* Image: Constraint of Street Name* Image: Constree Name* Image: Constraint of | | | | | |
| | | You have completed the Add Request tab. Continue to the next section. | | | | | |



Completes Statements & Signatures: Equipment User

Complete the following steps to complete the attestations in the Statement & Signatures tab:

| | Step | Action | | | | | | | |
|----|-------|--|--|--|--|--|--|--|--|
| | EQUIF | IPMENT USER'S STATEMENT | | | | | | | |
| | | From the Dashboard, select the Crane Notices tab. | | | | | | | |
| | | + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit | | | | | | | |
| 1. | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | | | | | | |
| 2. | | Locate the Crane Notice application. Double-click to view the details. | | | | | | | |
| | | | | | | | | | |
| | | Job Number Notice Type Filling Type Filling Status Crane Notice Status Address Crane Type Actions Filter Filter | | | | | | | |
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self Erecting Tower Crane). | | | | | | | |
| | | + Prototype + Crane Device + Master Rigger Notification + AHV Permits | | | | | | | |
| | | My Prototypes My Crane Devices My Crane Notices My Rigger Notifications My AHV Work Permits Search | | | | | | | |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | | | | | | |
| | | Job Number Notice Type Filing Type Filing Status Crane Notice Status Filter Filter Filter Filter Filter | | | | | | | |



| | Step | Action | | | | | | | |
|----|-------|---|-----------------------|-------------------------|---------------------------------|--------------|--------------|----------|--|
| ſ | | A Crane Notice Information pop-up window displays with the message: Job Number: CN00023319 Filing Type: Crane Notice | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 3. | | Crane Type: Self E | recting lower Cr | ane | | | | | |
| | | Click OK to procee | ed. | | | | | | |
| | | Crane Notice Inform | mation | | ~ | | | | |
| | | Job Number: CN000 Filing Type: Crane N Crane Type: Mobile (| otice | | | | | | |
| | | | | OK Cancel | | | | | |
| - | Note: | The page refreshe highlighted (e.g., F | | e Crane Not | ice Application a | nd the curi | rent task ta | b is | |
| | | Pre-filing | Pending QA Assignment | Pending QA Admin Revi | ew Pending PE Assignmer | t DE Davia | w in Process | Approved | |
| | | Save Submit | | provide subsequent phas | | x | Win Process | | |
| | | CN00023319 | General Information | | | | - | | |
| | | General Information | Filing Information | | | | | | |
| | | Prototype & Phase Information | Crane Notice Type* | | Filing Type* | | Crane Type* | | |
| | | Assign CD to CN | Crane Notice | * | New | • | Mobile Crane | | |
| | | Lift Director | Location Information | | | | | | |
| | | HMO(s) | House Number* | | Street Name* | | Borough* | | |
| | | Documents | 280 | | BROADWAY | | MANHATTAN | | |
| | | Phase Details | Block* | | Lot* | | BIN* | | |
| | | | 153 | | 1 | | 1079215 | | |
| | | Equipment User(s) | Owner Type* | | Associated BIS/DOB NOW Job Numl | per (May 5)* | | | |
| | | Statements & Signatures | Individual | • | 185007226 | Ser (Flax 5) | | | |
| | | | | | 66 characters remaining | | | | |



| | Step | Action | | | | | | |
|----|------|---|---|---------------------|---------------------------------|----------------------|-----------------------------|------------------------------|
| | | Select the Equip | ment User(s) tal | Э. | | | | |
| | | 🗎 Save 📄 Submit | | | | | | ■ Notify DOB ▼ |
| | | CN00023319 | Additional Equipmen | t User(s) | | | | |
| 1 | | General Information | Associated Equipment Use | er(s) | | | | > |
| 4. | | Prototype & Phase Information Assign CD to CN | Request New Equipment | ıser(s) | | | | * |
| | | Lift Director | + Add Request | | | | | |
| | | HMO(s) Documents | Request Number 669449 | Request Star | tus Total users 1 User(s) | Request Fee | (\$) Payment Status Due | Created Date - 10/15/2019 |
| | | Phase Details Equipment User(s) Statements & Signatures | | | | | | |
| - | | Double-click the | Request Numb | er to displa | y the Equipment | User inf | ormation. | |
| 5. | | CN00023319 | Additional Equipmer | nt User(s) | | | | |
| | | General Information | Associated Equipment Us | er(s) | | | | > |
| | | Prototype & Phase Information Assign CD to CN | Request New Equipment | user(s) | | | | * |
| | | Lift Director | + Add Request | | | | | |
| | | HMO(s) Documents | Request Number | Request Sta | tus Total users | Request Fee | e(\$) Payment Statu | Created Date - |
| | | Phase Details Equipment User(s) Statements & Signatures | | | | | | |
| 5 | | attestation. | | - | st. oment User Infor | mation | Details to co | mplete the |
| | | 669449 | General Information | | | | | |
| | | General Information | Filing Information | | | | | |
| | | Statements & Signatures | Filing Type* New Equipment User(s) | * | Crane Notice Number* | | Crane Type* Mobile Crane | • |
| | | | Location Information | | | | | |
| | | | House Number* | | Street Name* BROADWAY | | Borough* MANHATTAN | Ŧ |
| | | | Block* | | Lot* | | BIN* | |
| | | | 153 | | 1 | | 1079215 | |
| | | | Equipment User(s) Information Add Equipment User | | | | | |
| | | | First Name | Last Name | Email DOBTESTING456@GMAILCOM | Busin TESTING LLC | ess Name No | Identified Edit |
| | | | | | | | | |



| | Action | | | | |
|-------|---|---|--|--|--|
| | The Equipment User Details pop-up window displays. | | | | |
| | Select the Equipment User's | s Statement check box to e | electronically attest. | | |
| | The Name and Date fields a | uto-populate by the system | n. | | |
| | Equipment User Details | | | | |
| | Email* | Last Name | First Name | | |
| | DOBTESTING456@GMAIL.COM | DOB | TESTING | | |
| | License Type* | License Number* | Business Name* | | |
| | Professional Engineer | ▼ 084735 | TESTING LLC | | |
| | Business Name | Business Address | City | | |
| | TESTING LLC | TESTING LLC | NYC | | |
| | | Zin Code | Dusinges Telephone | | |
| | State | Zip Code | Business Telephone (201) 365-5885 | | |
| | Mobile Telephone | 10007 | (201) 302-3063 | | |
| 4 | 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 tha 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, monetany 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. 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) | | | | |
| | with all New York City Administrative holders conduct their specific trade. I have reviewed the information provide falsification of any statement made employee to accept, any benefit, in consideration. Such actions are purise all of its terms. I understand that this Name Name TESTING DOB | ve Code and Department rules, regulations, vided in this application and, to the best of r to the Department is a misdemeanor and i monetary or otherwise, either as a gratuit shable by imprisonment, fine and/or loss of lic onally clicking on the box at left I am electror electronic signature shall have the same valid | and directives governing how licensees/ registrants/qualificat my knowledge and belief, attest to its accuracy. I understand t that it is also unlawful to give to a city employee, or for a or y for properly performing the job or in exchange for spe- rense/registration and/or qualification. nically signing this application and expressing my agreement w ity and effect as a signature affixed by hand. Date 10/21/2019 | | |
| Note: | with all New York City Administrativ holders conduct their specific trade. I have reviewed the information pro- falsification of any statement made employee to accept, any benefit, i consideration. Such actions are puris of l understand and agree that by person all of its terms. I understand that this Name TESTING DOB (Electronically Signed) | ve Code and Department rules, regulations, vided in this application and, to the best of r to the Department is a misdemeanor and i monetary or otherwise, either as a gratuit hable by imprisonment, fine and/or loss of lic conally clicking on the box at left I am electror electronic signature shall have the same valid | and directives governing how licensees/ registrants/qualificat ny knowledge and belief, attest to its accuracy. I understand t that it is also unlawful to give to a city employee, or for a y for properly performing the job or in exchange for spe rense/registration and/or qualification. hically signing this application and expressing my agreement w lity and effect as a signature affixed by hand. Date 10/21/2019 | | |
| Note: | with all New York City Administrative holders conduct their specific trade. I have reviewed the information provide falsification of any statement made employee to accept, any benefit, in consideration. Such actions are purise all of its terms. I understand that this Name Name TESTING DOB | ve Code and Department rules, regulations, vided in this application and, to the best of r to the Department is a misdemeanor and i monetary or otherwise, either as a gratuit hable by imprisonment, fine and/or loss of lic conally clicking on the box at left I am electror electronic signature shall have the same valid | and directives governing how licensees/ registrants/qualification of the second | | |
| Note: | with all New York City Administrative holders conduct their specific trade. I have reviewed the information propriation. Such actions are purised and agree that by personal of its terms. I understand that this Name I understand and agree that by personal of its terms. I understand that this (Electronically Signed) The statement applicable to Equipment's Statement As a condition of being granted a lik with all New York City Administrative holders conduct their specific trade. I have reviewed the information propriate the information propriate in the information propriate in the information propriet information prop | ve Code and Department rules, regulations, vided in this application and, to the best of r to the Department is a misdemeanor and monetary or otherwise, either as a gratuit hable by imprisonment, fine and/or loss of lic conally clicking on the box at left I am electror electronic signature shall have the same valid Save Cance to the Stakeholder that's log conserve statement rules, regulations, and vided in this application and/or qualification from t to the Department is a misdemeanor and to the best of n to the Department is a misdemeanor and to the Department is a misdemeanor and to the best of n to the Department is a misdemeanor and to the best of n to the Department is a misdemeanor and to the best of n to the Department is a misdemeanor and to the Department is a misdemeanor and to the best of n to the Department is a misdemeanor and to the best of n to the Department is a misdemeanor and to the best of n to the Department is a misdemeanor and to the best of n to the Department is a misdemeanor and to the De | and directives governing how licensees/ registrants/qualificat my knowledge and belief, attest to its accuracy. I understand t that it is also unlawful to give to a city employee, or for a y for properly performing the job or in exchange for spe rense/registration and/or qualification. hically signing this application and expressing my agreement w lity and effect as a signature affixed by hand. Date 10/21/2019 et agged in highlights in blue. | | |
| Note: | with all New York City Administrative holders conduct their specific trade. I have reviewed the information proval falsification of any statement made employee to accept, any benefit, i consideration. Such actions are purise all of its terms. I understand that this Name I understand and agree that by personal of its terms. I understand that this (Name) TESTING DOB (Electronically Signed) The statement applicable to As a condition of being granted a lid with all New York City Administrative holders conduct their specific trade. I have reviewed the information provalistification of any statement made employee to accept, any benefit, i consideration. Such actions are punise | ve Code and Department rules, regulations, vided in this application and, to the best of r to the Department is a misdemeanor and i monetary or otherwise, either as a gratuit ishable by imprisonment, fine and/or loss of lic conally clicking on the box at left I am electron electronic signature shall have the same valid sector electronic signature shall have the same valid sector electronic signature shall have the same valid sector electronic electroni | and directives governing how licensees/ registrants/qualificat my knowledge and belief, attest to its accuracy. I understand t that it is also unlawful to give to a city employee, or for a d y for properly performing the job or in exchange for spe- tense/registration and/or qualification. hically signing this application and expressing my agreement w lity and effect as a signature affixed by hand. Date 10/21/2019 el el be New York City Department of Buildings, I attest that I comp and directives governing how licensees/ registrants/qualification my knowledge and belief, attest to its accuracy. I understand th that it is also unlawful to give to a city employee, or for a c y for properly performing the job or in exchange for spe- ense/registration and/or qualification. | | |
| Note: | with all New York City Administrative holders conduct their specific trade. I have reviewed the information proval falsification of any statement made employee to accept, any benefit, i consideration. Such actions are purise all of its terms. I understand that this Name I understand and agree that by personal of its terms. I understand that this (Name) TESTING DOB (Electronically Signed) The statement applicable to As a condition of being granted a lid with all New York City Administrative holders conduct their specific trade. I have reviewed the information provalistification of any statement made employee to accept, any benefit, i consideration. Such actions are punise | ve Code and Department rules, regulations, wided in this application and, to the best of r to the Department is a misdemeanor and monetary or otherwise, either as a gratuit hable by imprisonment, fine and/or loss of lic conally clicking on the box at left I am electror electronic signature shall have the same valid Save Cance to the Stakeholder that's log the Stakeholder that's log conservegistration and/or qualification from the Code and Department rules, regulations, a vided in this application and, to the best of n to the Department is a misdemeanor and two the Department fine and/or loss of lic conalty clicking on the box at left I am electron | and directives governing how licensees/ registrants/qualification ny knowledge and belief, attest to its accuracy. I understand th that it is also unlawful to give to a city employee, or for a c y for properly performing the job or in exchange for spec- tense/registration and/or qualification. hically signing this application and expressing my agreement with ity and effect as a signature affixed by hand. Date 10/21/2019 el el be New York City Department of Buildings, I attest that I comp and directives governing how licensees/ registrants/qualification ny knowledge and belief, attest to its accuracy. I understand th that it is also unlawful to give to a city employee, or for a city y for properly performing the job or in exchange for speci- ense/registration and/or qualification. iscally signing this application and expressing my agreement with is also unlawful to give to a city employee, or for a city or properly performing the job or in exchange for speci- inse/registration and/or qualification. | | |

DOB NOW: *Build* Self Erecting Tower Cranes Step-By-Step Guide June 2020



| | Step | Action |
|----|------|---|
| | | Below the Name and Date fields, click Save. |
| | | 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. |
| 8. | | Name Date TESTING DOB 10/22/2019 (Electronically Signed) 10/22/2019 |
| | | Save Cancel |
| | | A Notification pop-up window displays with the message: |
| | | Equipment user updated successfully. |
| 9. | | Click OK to continue. |
| | | Notification |
| | | Equipment user updated successfully. |
| | | ОК |
| | Y | ou have completed the Complete Statements and Signatures: Equipment User section. |
| | | Continue to the next section. |



Complete Statements & Signatures: Applicant of Record

Complete the following steps to complete the attestations in the **Statement & Signatures** Tab:

| | Step | Action | | | | | |
|----|-------|--|--|--|--|--|--|
| | APPLI | CANT OF RECORD | | | | | |
| | | From the Dashboard, select the Crane Notices tab. | | | | | |
| | | ★ + Prototype + Crane Device + Crane Notice + Onsite Waiver + Master Rigger Notification + AHV Permit | | | | | |
| 1. | | Prototypes Crane Devices Crane Notices Phase-Jump/Disassembly Details Onsite Waivers Master Rigger Notifications All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | | | | |
| 2. | | Locate the Crane Notice application. Double-click to view the details. | | | | | |
| | | My Prototypes My Crane Devices My Crane Notices My Onsite Waiver My Rigger Notifications # ARV Permits Multiple My Crane Devices My Crane Notices My Onsite Waiver My Rigger Notifications My ARV Work Permits Search All Tower Crane Self Erecting Tower Grane Mobile Crane Mast Clumber Derrick Dedricated Pile Driver Stateath Change View | | | | | |
| | | Job Number Notice Type Filling Type Filling Status Crane Notice Status Address Crane Type Actions Ritter Ritter | | | | | |
| | Note: | To filter the Crane Notices by Crane Type select the respective tab (e.g., Self Erecting Tower Crane). | | | | | |
| | | + Prototype + Crane Device + Master Rigger Notification + AHV Permits | | | | | |
| | | My Prototypes My Crane Devices My Crane Notices My Rigger Notifications My AHV Work Permits Search | | | | | |
| | | All Tower Crane Self Erecting Tower Crane Mobile Crane Mast Climber Derrick Dedicated Pile Driver | | | | | |
| | | Job Number Notice Type Filing Type Filing Status Crane Notice Status | | | | | |
| | | Filter Filter Filter | | | | | |



| | Step | Action | | | | | |
|----|-------|---|---|--|--|---|----------|
| | | A Crane Notice In | formation pop-u | p window di | splays with the me | ssage: | |
| | | Job Number: CN0 | 0023319 | | | | |
| | | | | | | | |
| | | Filing Type: Crane | Notice | | | | |
| | | Crane Type: Self E | recting Tower Cr | ane | | | |
| 3. | | Click OK to procee | ed. | | | | |
| | | Crane Notice Inform | mation | , | × | | |
| | | Job Number: CN000 Filing Type: Crane N Crane Type: Mobile (| otice | | | | |
| | | | | | | | |
| | | | | OK Cancel | | | |
| - | Note: | The page refreshe highlighted (e.g., F | | | ce Application and | the current task ta | b is |
| - | Note: | highlighted (e.g., F | Phase Details). | e Crane Noti | ? | • | © |
| - | Note: | | Phase Details). | | w Pending PE Assignment | the current task ta | b is |
| - | Note: | highlighted (e.g., F | Phase Details). Pending QA Assignment | e Crane Noti Pending QA Admin Revie | w Pending PE Assignment | • | Approved |
| - | Note: | highlighted (e.g., F Pre-filing Pre-filing Save Submit CN00023319 | Phase Details). | e Crane Noti Pending QA Admin Revie | w Pending PE Assignment | • | Approved |
| | Note: | highlighted (e.g., F Pre-filing Pre-filing Pre-filing General Information | Pending QA Assignment Pending QA Assignment Pending QA Assignment Pending QA Assignment Pending Information Filling Information | e Crane Noti Pending QA Admin Revie provide subsequent phase | w Pending PE Assignment | PE Review in Process | Approved |
| | Note: | highlighted (e.g., F Pre-filing M Save Submit CN00023319 General Information Prototype & Phase Information | Pending QA Assignment Pending QA Assignment Please p General Information | e Crane Noti Pending QA Admin Revie provide subsequent phase | w Pending PE Assignment | • | Approved |
| - | Note: | highlighted (e.g., F Pre-filing Pre-filing Prototype & Phase Information Prototype & Phase Information Assign CD to CN | Pending QA Assignment Pending QA Assignment Please p General Information Filing Information Crane Notice Type* Crane Notice | e Crane Noti Pending QA Admin Revie provide subsequent phase | w Pending PE Assignment e information | PE Review in Process | Approved |
| | Note: | highlighted (e.g., F Pre-filing M Save Submit CN00023319 General Information Prototype & Phase Information | Pending QA Assignment Pending QA Assignment Please p Ceneral Information Filing Information Crane Notice Type* Crane Notice Location Information | e Crane Noti Pending QA Admin Revie provide subsequent phase | ew Pending PE Assignment e information Filing Type* New | PE Review in Process | Approved |
| - | Note: | highlighted (e.g., F Pre-filing Pre-filing Prototype & Phase Information Prototype & Phase Information Assign CD to CN | Pending QA Assignment Pending QA Assignment Please p General Information Filing Information Crane Notice Type* Crane Notice | e Crane Noti Pending QA Admin Revie provide subsequent phase | w Pending PE Assignment e information | PE Review in Process | Approved |
| | Note: | highlighted (e.g., F Pre-filing Pre-filing Save Submit CN00023319 General Information Prototype & Phase Information Assign CD to CN Lift Director | Pending QA Assignment Pending Caracter Pending Caracter Pending Caracter Pending Caracter Pending Caracter Crane Notice Type* Crane Notice Location Information House Number* | e Crane Noti | ew Pending PE Assignment e information Filing Type* New Street Name* | PE Review in Process | Approved |
| - | Note: | highlighted (e.g., F Pre-filing Pre-filing Save Submit CN00023319 General Information Prototype & Phase Information Assign CD to CN Lift Director HMO(s) | Pending QA Assignment Pending QA Assignment Pending QA Assignment Please p Please | e Crane Noti | ew Pending PE Assignment e information Filing Type* New Street Name* BROADWAY | PE Review in Process Crane Type* Crane Type* Mobile Crane Borough* MANHATTAN | Approved |
| - | Note: | highlighted (e.g., F Pre-filing Pre-filing Prototype & Phase Information Prototype & Phase Information Assign CD to CN Lift Director HMO(s) Documents | Pending QA Assignment Pending QA Assignment Pending QA Assignment Please r Please | e Crane Noti | w Pending PE Assignment information Filing Type* New Street Name* BROADWAY Lot* | Crane Type* Mobile Crane Borough* BiN* | Approved |
| - | Note: | highlighted (e.g., F Pre-filing Pre-filing Pre-filing Prototype & Unit Prototype & Phase Information Assign CD to CN Lift Director HMO(s) Documents Phase Details | Pending QA Assignment Pending QA Assignment Pending QA Assignment Please r Please | e Crane Noti | w Pending PE Assignment information Filing Type* New Street Name* BROADWAY Lot* | Crane Type* Crane Type* Crane Borough* MANHATTAN BIN* 1079215 | Approved |



| | Step | Action | | | | | | |
|----|------|---|------------------------------|---------------------------|--------------------------------------|-----------------|----------------|----------------|
| | | Select the Equipr | ment User(s) | tab. | | | | |
| | | 🍽 Save 📄 Submit | | | | | | ■ Notify DOB ▼ |
| | | CN00023319 | Additional Equipr | nent User(s) | | | | |
| 4. | | General Information Prototype & Phase Information | Associated Equipmen | t User(s) | | | | > |
| т. | | Assign CD to CN | Request New Equipm | ent user(s) | | | | ~ |
| | | Lift Director HMO(s) | + Add Request Request Number | Request Status | Total users | Request Fee(\$) | Payment Status | Created Date - |
| | | Documents | 669449 | Pre-filing | 1 User(s) | 100 | Due | 10/15/2019 |
| | | Phase Details Equipment User(s) | | | | | | |
| | | Statements & Signatures | | | | | | |
| - | | | | | | | | |
| | | Double-click the | Request Num | iber to display th | e Equipment | User infor | mation. | |
| 5. | | CN00023319 | Additional Equipr | ment User(s) | | | | |
| | | General Information Prototype & Phase Information | Associated Equipmer | | | | | > |
| | | Assign CD to CN Lift Director | Request New Equipm | ient user(s) | | | | |
| | | HMO(s) | + Add Request Request Number | Request Status | Total users | Request Fee(\$) | Payment Status | Created Date 👻 |
| | | Documents Phase Details | 669449 | Pre-filing | 1 User(s) | 100 | Due | 10/15/2019 |
| | | Equipment User(s) | | | | | | |
| 6. | | Statements & Signatures | | | | | | |
| | | The Request Det | ails display. | | | | | |
| | | Select the Staten | nent & Signat | ures tab. | | | | |
| | | | | | | | | |
| | | ← Back to CN | 💾 Save 🌓 | Submit | | | | _ |
| | | 669449 | | Statement | s & Signa | tures | | |
| | | General Informat | ion | Applicant's State | ement | | | |
| | | Statements & Sig | gnatures | | dition of being rative Code and I | | | |



| | Step | Action | | | |
|----|---|---------------------------------------|---|---|--|
| | Click the Applicant's Statement check-box to electronically attest. | | | | |
| | | The Name and Date field | s auto-populate by the syster | n. | |
| | | Statements & Signatures | | | |
| 7. | | Applicant's Statement | | | |
| /. | | | se/registration and/or qualification from the New York Cit es, regulations, and directives governing how licensees/ regis | y Department of Buildings, I attest that I comply with all New York City strants/qualification holders conduct their specific trade. | |
| | | made to the Department is a misdemean | or and that it is also unlawful to give to a city employee, or | belief, attest to its accuracy. I understand that falsification of any statement for a city employee to accept, any benefit, monetary or otherwise, either as punishable by imprisonment, fine and/or loss of license/registration and/or | |
| | | | s my actions undertaken in connection with my license/re- gation and that failure to do so may result in immediate susp | gistration and/or qualification, I understand that the Administrative Code ension, revocation or other disciplinary action. | |
| | | | y clicking on the box at left I am electronically signing this a le same validity and effect as a signature affixed by hand. | upplication and expressing my agreement with all of its terms. I understand | |
| | | Name | | Date | |
| | | JOE ADAM (Electronically Signed) | | 10/15/2019 | |
| | | (2000 00000) 00000 | | | |
| з. | | ← Back to CN P Save S S | Statements & Signatures | | |
| | | General Information | Applicant's Statement | | |
| 9. | | Statements & Signatures | As a condition of being granted Administrative Code and Departm | | |
| | | A Notification pop-up wit | ndow displays with the messa | age: | |
| | | Job filing has been saved. | | | |
| | | Click OK to continue. | | | |
| | | Notification | : | × | |
| | | Job filing has been saved. | | | |
| | | | ОК | | |
| | You have | l | nts & Signatures: Applicant of | Record Sten-hy-Sten Guide | |
| | | ie to the next section. | | πετοιά στεμ-ωγ-στεμ Οάίαε. | |
| | Continu | | | | |



Pay Fees

Complete the following steps to submit a payment application to the NYC Department of Buildings.

| Step | Action |
|-------|--|
| Note: | The job filing's fees must be paid before continuing to Preview to File. |
| 1. | At the bottom-right of the screen, click Pay Now. |



| | Step | Action | | | | |
|----|------|---|--|--|--|--|
| | | The Payment Confirmation pop-up window displays with the message: | | | | |
| | | Are you sure you want to make a payment now for \$100.00? | | | | |
| | | Payment is not the last step. Click the Preview to File/Submit button at the top of the screen to submit the application. | | | | |
| 2. | | Please confirm that your pop-up blocker is turned off before proceeding to Payment. | | | | |
| | | Click Yes , to proceed. | | | | |
| | | Payment Confirmation | | | | |
| | | Please note that the following data cannot be changed after the payment has been made on this filing: | | | | |
| | | Add/delete Equipment User(s) Information | | | | |
| | | Are you sure you want to make a payment now for \$100.00 ? | | | | |
| | | Payment is not the last step. Click the Preview to File/Submit button at the top of the screen to submit the application. | | | | |
| | | Please confirm that your pop-up blocker is turned off before proceeding to Payment. | | | | |
| | | Yes | | | | |
| 3. | | The page is redirected to NYC City Pay. | | | | |
| | | Pay the application fees via eCheck or Credit Card by selecting the applicable tab. | | | | |
| | | | | | | |
| | | Enter Payment Details 1. Select Items 2. Enter Payment 3. Review and Pay | | | | |
| | | Payment Amount: \$2,000.00 Credit Card | | | | |
| | | C & D: APPLICATION AMENDMENT DOB NOW Build Prototype : CP00001582-0A0000003 : Amendment Crane Prototype \$2,000.00 To pay by electronic check, you will need your checking account and routing number. There is no additional fee. | | | | |
| | | Billing Information First Name * | | | | |
| | | Last Name * | | | | |
| | | Country * United States * | | | | |



| | Step | Action |
|----|------|---|
| 4. | | The Notification pop-up window displays on the DOB NOW page with the message: Payment processed succesfully. Click OK to proceed. |
| | | You have completed the Pay Fees section. Continue to the next section. |



Submit Request

Complete the following steps to submit the application to the NYC Department of Buildings.

| | Step | Action | |
|----|-------|--------------------------------------|---|
| | APPLI | CANT OF RECORD | |
| | | At the top-left of the scree | en, click Submit . |
| 1. | | ← Back to CN 🗎 Save 📔 S | ubmit |
| | | 669449 | Statements & Signatures |
| | | General Information | Applicant's Statement |
| | | Statements & Signatures | As a condition of being granted a license/registration a Administrative Code and Department rules, regulations, ar |
| 2. | | Please confirm if you woul | displays with the message: d like to proceed with Submit application to DOB. |
| | | Click Yes to proceed. | × |
| 3. | | | like to proceed with Submit |
| | | | dows displays with the message: ssfully. Information forwarded to DOB for review. cation pop-up window. × |
| | | Job filing submitted success DOB. | ok |

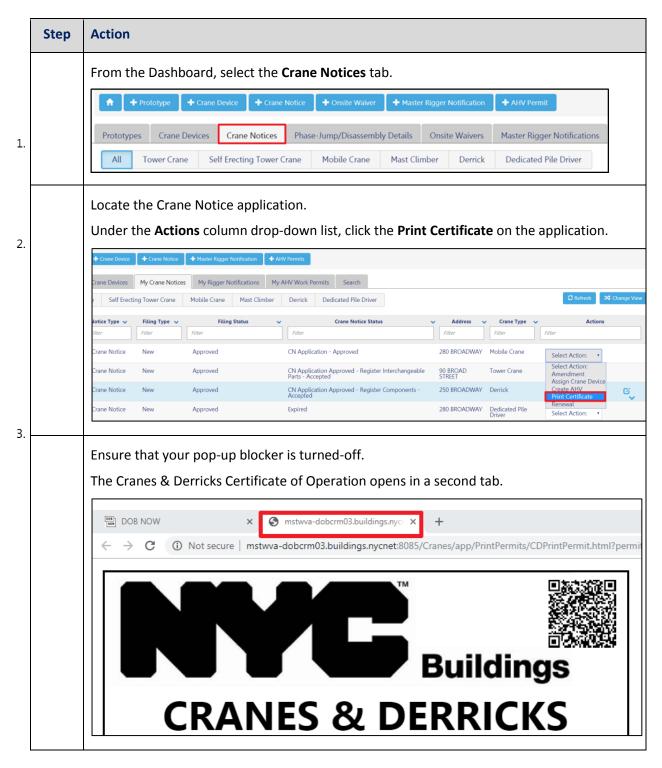


| Step | Action | |
|-------|--|--------------------------------|
| Note: | The Status Bar updates to the next stage in the job filing pro | cess (e.g., Approved). |
| | Pre-filing | Approved |
| | You have completed the Submit Request Step-by | -Step Guide. |



Print On-Site Certificate: From the Dashboard

Complete the following steps to print the On-Site Certificate from the dashboard:





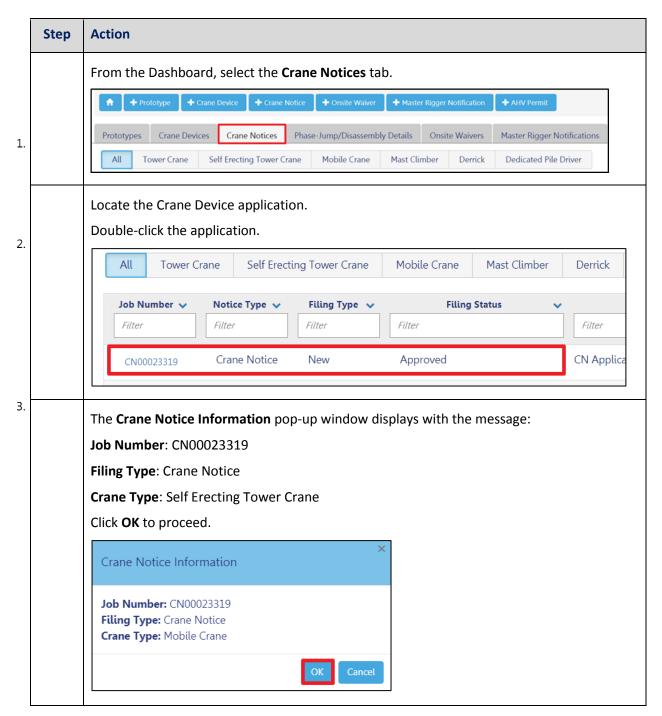






Print Certificate: From within the Application

Complete the following steps to print the CD Certificate from within the application:





| | Step | Action |
|----|------|--|
| | | The Crane Device application displays. On the bottom-right, click Print Certificate . |
| 4. | | PE Review in Process Approved Notify DOB Notify DOB Application Highlights |
| | | Crane Type* Mobile Crane Borough* Source S |
| | | BIN* 1079215 Certificate Certificate |
| 5. | | Ensure that your pop-up blocker is turned-off. The On-Site Certificate opens in a second tab. |
| | | DOB NOW × mstwva-dobcrm03.buildings.nycr × + ← → C (i) Not secure mstwva-dobcrm03.buildings.nycnet:8085/Cranes/app/PrintPermits/CDPrintPermit.html?permit |
| 6. | | CRANES & DERRICKS |
| | | From the bottom of the page click Print to PDF . Tampering with or knowingly making a false entry in or falsely altering this permit is a crime that is punishable by a fine, imprisonment or both. |
| | | Print To PDF |



| | Step | Action | | |
|----|------|--|--|--|
| | | The internet browser downloads the certificate. Click the file arrow and select Open . | | |
| 7. | | Emergency 1 Open Assistant Co Always open with system viewer Open with system viewer Show in folder Commission Cancel CertificateOfOperapdf | | |
| 8. | | A third tab opens with the print options. Click Print. | | |
| | | Construction of the College of the C | Print Destination Pages Copies Color More settings | I sheet of paper 22R-SFLR-CONSULTAT AII Color V V Print Cancel |
| | You | have completed the On-Site Certificate: From within the Application | Step-by- | Step Guide. |