



# Notification of Staging And Outrigger Beam Use By Special Riggers

File Representative - Last Name

Please file 3 copies  
Application Must Be Typewritten

1. Location of Job		
Borough:	Block:	Lot:
House No.(s):	Street Name:	
Cross Street(s):	No. of Stories:	

2. Filing Representative Information		
Last Name:	First Name:	M.I.:
Registration No:	Email address:	
Business Name:	Business Telephone:	Fax:
Address:		
City:	State:	ZIP:

3. Special Rigger Information		
Last Name:	First Name:	M.I.:
License No.:	Email address:	
Business Name:	Business Telephone:	Fax:
Address:		
City:	State:	ZIP:

4. Owner or Managing Agent Information		
Last Name:	First Name:	M.I.:
License No.:	Email address:	
Business Name:	Business Telephone:	Fax:
Address:		
City:	State:	ZIP:

5. Job Information	
Description of Work to be Performed:	Date Submitted Stamp:
Expected Start Date:	
Approximate Duration of Job:	

6. Statement and Signatures		
<ul style="list-style-type: none"> <li>I certify that the subject work and setup of equipment will be done under my supervision or under the supervision of _____ (Supervisor, foreman or Special Rigger) The work will be done in a safe and workman-like manner</li> <li>Falsification of any statement is a misdemeanor under Section 26-124 of the Administrative Code and is punishable by a fine or imprisonment, or both.</li> <li>It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both.</li> </ul>		
Name of Licensed Rigger (Please Print)	Signature of Licensed Rigger	Date:

For Internal Use Only		
Approved by Examiner:		Application No.
Signature of Examiner:	Date:	Expiration Date: