





Business Approval Requests: Elevator Agencies

The following Step-by-Step Guide will outline the steps applicable to Business Approval Requests for Elevator Agencies in DOB NOW: Licensing.

HELPFUL LINKS

YouTube.com/DOBNOW

NYC.gov/DOBNOWINFO



@NYCBuildings

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Overview

This step-by-step guide will provide applicants with a systematic understanding of how to request Business Approval for an Elevator Agency in DOB NOW: *Licensing*.

This step-by-step guide will explain and visually show an applicant how to navigate the Licensing Dashboard.

Requirements

- Business Approval Requests (BAR) can only be submitted by Elevator Directors.
- They will need to be requested using an approved License Qualification Application (LQA) number. The BAR can be for a new Elevator Agency or for a change to an existing Elevator Agency.

SYSTEM GUIDELINES

- 1. Fields with a red asterisk (*) are required and must be completed.
- 2. Grayed-out fields are Read-Only or are auto-populated by the system.
- Depending on the size of your screen or browser you may have to use the scroll bar to view more options or full fields.

Enter email/username		Select:	•		
ing Representa	tive Information		2		
+ Add Repres	entative				
First Name	Last Name	Email	Business Name	Business Telephone	A
ADAM	JOE2	AJOETEST2@GMAIL.COM	AJ2	(201) 222-3333	C
ADAM	JOE2	AJOETEST2@GMAIL.COM	AJ2	(201) 222-3333	

ADDITIONAL HELP & INFORMATION

- 1. Video Tutorials: DOB NOW YouTube Channel: <u>https://www.youtube.com/user/NYCBUILDINGS</u>
- 2. Presentations & Sessions: <u>https://www1.nyc.gov/site/buildings/industry/dob-now-training.page</u>

New Business Approval Requests

Business Approval Requests (BARs) are associated only with Elevator Director LQAs. Once the Elevator Director LQA has passed the background approval process, the Director will receive an email notifying them that they may proceed with a BAR.

While a BAR may be submitted either for a new Elevator Agency or for updates to existing Elevator Agencies, this step-by-step will address **new Elevator Agencies**. Update BARs will have some fields automatically filled instead of manually filled but otherwise the process is the same.

Step	Action			
1.	Click the +Business Approval button from the DOB NOW: <i>Licensing</i> dashboard.			
	DOB NOW NOW LICENSING			
	A How License ▲ Manage My Profile			
	My Applications My Requests Business Approval Exam Payment			
2.	Enter the approved License Qualification Number from the Elevator Director's LQA.			
	Business Approval Request			
	Enter the approved License Qualification number that is associated to this Business Approval application.*			
	Submit 🗙 Cancel			
3.	The first question asks if the Applicant is joining an existing agency or establishing a new agency. Select New Agency .			
	New or Existing Agency			
	Are you creating a new agency or are you joining an already approved existing agency? * O New Agency O Existing Agency			

Step	Action					
i	If Applicants are joining an existing Agency, they can search for the Agency by the Agency Number .					
	Agency Search					
	Search by Agency Number: *					
	Enter Agency Number					
	Agency Information	Q Search				
4.	Fill in all Agency Information other than Agen	Fill in all Agency Information other than Agency Number (which will be assigned by DOB).				
	Agency Information Agency Name* Agency Number	Agency Address*				
	City* State*	Zip*				
	Business Telephone* Business Type*					
	Select Type:	~				
	The Business Type can be:	Business Type*				
	 Limited Liability Company (LLC) 	Select Type:				
	Partnershin	Corporation				
	Sole Proprietor	Limited Liability Company (LLC) Partnership				
		Sole Proprietor				
		s Individual n				
5.	Click Save.					
	General Information					
	Documents					
	Statements & Signature					

Step	Action			
6.	Click Yes to confirm. Confirm X Are you sure you want to create a Business Approval Request? Ves No			
7.	Click +Add to enter Partner or Officer Information. Partner or Officer Information* Add			
8.	Enter all required information in the Partner or Officer Information window and then click Save.			

Step	Action				
9.	Continue until all required Partners or Officers have been added.				
	Partner or Officer Information*				
	+ Add				
	Name	Street Address	License Number	% Control	Actions
	Elevator License02 Other Director	280 Broadway 280 Broadway		50	8 û 8 û
10.	Enter General Liabilit y required for Elevator	y Insurance informatio Agencies.)	on. (NOTE: Gener a	al Liability Insura	nce is always
	Insurance Information*				
	General Liability Insurance* General Liability Insurance Policy Nur	mber* Policy Start Date*		General Liability Insurance Exp	iration Date (mm/dd/yyyy)*
	Broker Information*				
11.	If they are not waived information must be e	, Workers Compensatentered.	t ion Insurance and	d Disability Insur	ance
	Workers' Compensation Insurance				
	Is the Workers' Compensation Insurance w Workers' Compensation Insurance Policy N	aived?* O Yes Number* Workers' Compensation	No Insurance Start Date (mm/dd/yyyy)*	Workers' Compensation Insurance I	Expiration Date (mm/dd/yyyy)*
	Broker Information*				
	Disability Insurance				
	Is the Disability Insurance waived?*	⊖ Yes	No No		
	Disability Insurance Policy Number*	Disability Insurance Star	t Date (mm/dd/yyyy)*	Disability Insurance Expiration Dat	e (mm/dd/yyyy)*
	Broker Information*				
i	NOTE: Workers Comp	ensation Insurance a	nd Disability Insu	r ance may only b	e waived for
	have both types of ins waived, no additional	Elevator Licenses (oth	neral Liability Insu her than the Direct	rance. If the insu tor) may be adde	irances are d to the
	Elevator Agency.				

Step	Action			
12.	There is an optional Comments field at the bottom of the General Information tab.			
	Comments 500 characters remaining			
13.	In the Documents tab, users may upload:			
	NYS Certificate of Incorporation			
	Filing Receipt or Certificate of Good Standing			
	Minutes stating the names of the elected officers			
	General Liability Insurance Certificate			
	Workers Compensation Insurance Certificate (or Waiver)			
	Disability Insurance Certificate (or Waiver)			
	Upload a Document			
	Document Name*			
	Document Type*			
	Select ~			
	Select NYS Certificate of Incorporation Filing Receipt or Certificate of Good Standing Minutes stating the names of the elected officers General Liability Insurance Certificate Workers' Compensation Insurance Certificate(**) Disability Insurance Certificate (**)			
	Upload Cancel			

Step	Action
14.	There is no fee to submit a Business Approval Request. Click Submit. Image: Submit Submit Submit Statements & Signature
15.	Confirm × Are you sure you want to submit a Business Approval Request? Ves No
16. You hav	The request will show up on the Business Approval tab of the Licensing Dashboard.