



# LIC2-EL: Elevator License Application

Form must be typewritten  
License Number Section is used for: Changes and Reissues

## 1. APPLICATION TYPE

New     Reissue (Lost/Stolen)     Change (i.e. Address/Business)

## 2. LICENSE NUMBER & LICENSE TYPE

License No. \_\_\_\_\_ Type  Technician     Restricted Technician     Helper  
*(used for license Changes and Reissues)*

## 3. APPLICANT INFORMATION *(required for all applicants)*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone No. \_\_\_\_\_ Email Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security No. \_\_\_\_\_  
*(SSN required for NEW applicants only)*

Are you an employee of the City of New York?     Yes     No

## 4. ELEVATOR AGENCY INFORMATION *(required for all applicants)*

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Bus. Telephone No. \_\_\_\_\_ Bus. Email \_\_\_\_\_

## 5. LICENSING INFORMATION

List all licenses, certifications, or registrations issued to you, by the New York City Department of Buildings:

NAME	TYPE	LIC/CERT/REGISTRATION NO.	CURRENT STATUS	EXPIRATION DATE

Do you have a valid driver's license?     Yes     No    Driver's License No. \_\_\_\_\_ State \_\_\_\_\_

## 6. STATEMENTS & SIGNATURES

As a condition of being granted a license, I attest I comply with all NYC Administrative Code and Department rules, regulations, and directives governing how licensees conduct their specific trade. I understand it is unlawful to make a false statement to the Department; or 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. In the event of an accident that involves my actions undertaken in connection with my license, I understand that the Administrative Code requires that I cooperate with any investigation and that failure to do so may result in immediate suspension, revocation or other disciplinary action.

Licensee Name <i>(print)</i>	<b>Notarization</b> State of New York, County of:	<b>Notary Seal</b>
Licensee Signature		
Date	day of _____ 20____ Notary Signature	