NYC Buildings

CD Number: _____

1	Application Type

☐ New ☐ Renewal ☐ Amendment

2	Location Information

Job Number   Address

Borough   Block   Lot   BIN

3	Mast Climber Information

Make	Model	Model Year	Serial Number	Prototype #	CN #	CN Expiration Date	Position #

4	Mast Climber Owner Information

Name   Title

Business Name

Address   Phone   Fax

City   State   Zip

E-Mail

5	Owner's Authorized Inspector Information

Name   Title

Business Name

Address   Phone   Fax

City   State   Zip

E-Mail

6	Attachments

Inspection Checklist	☐ Yes ☐ No ☐ N/A
List of Critical Components	☐ Yes ☐ No ☐ N/A
Photos	☐ Yes ☐ No ☐ N/A
Disclosure of History	☐ Yes ☐ No ☐ N/A
Letter Identifying Service Support Contact	☐ Yes ☐ No ☐ N/A
Letter Identifying Technical Support Contact	☐ Yes ☐ No ☐ N/A
Other	☐ Yes ☐ No ☐ N/A

Rev. 05/17

7	**Statements and Signatures**

Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. 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. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

7A	**Owner's Statement and Signature**

I certify that I am the owner or duly authorized corporate officer of the company that owns the abovementioned mast climber. I further certify that such mast climber shall be delivered to the jobsite and inspected, adjusted, maintained, repaired, and installed at the jobsite in accordance with 1 RCNY §3314-01 subdivisions (e)(2)(ii)(B) and (C), and I authorize _____ (individual name) to inspect the mast climber in accordance with 1 RCNY §3314-01 subdivision (e)(2)(ii)(A).

I additionally certify that the information contained in the attached list of critical components and disclosure of history is correct and complete and in accordance with 1 RCNY §3314-01 subdivision (e)(2)(i) and 1 RCNY §3314-01 subdivision (e)(2)(iii).

I further certify that the manufacturer of the abovementioned mast climber:

Is in business	☐ Yes ☐ No
Is able to provide service support	☐ Yes ☐ No
Is able to provide technical support	☐ Yes ☐ No

If checked that the manufacturer is unable to provide service support:
I certify that ☐ I, or ☐ employee(s) of my company hereafter identified in the attached letter, take responsibility for providing service support for this mast climber.

> *Note: Such letter shall be on company letterhead, shall provide the name(s), phone number(s), fax number(s), address(es), and e-mail address(es) of contact person(s), and shall be signed and dated by such designated person(s).*

If checked that the manufacturer is unable to provide technical support:
I designate the New York State professional engineer hereafter identified in the attached letter to provide technical support for this mast climber.

> *Note: Such letter shall be on the letterhead of the engineer, shall provide the name, phone number(s), fax number(s), address(es), and e-mail address(es) of the engineer, and shall be signed, dated, and sealed by the designated engineer.*

Name (please print)

Signature   Date

7B	**Owner's Authorized Inspector Statement and Signature**

I certify that I have inspected the above mentioned mast climber on behalf of the owner of the mast climber in accordance with 1 RCNY §3314-01 subdivision (e)(2)(ii)(A), that such mast climber has ☐ passed ☐ failed such inspection, that the information contained in the attached inspection checklist is correct and complete, and that the attached photographs are of such mast climber and were taken at the time of my inspection.

Name (please print)

Signature   Date

7A	**Internal Use Only**	
Date Received	Invoice/Receipt Number	
Fee Paid	Fee Expiration Date	
Inspector's Name (please print)		
Signature	(Issuance) Date	