

### 1 APPLICATION TYPE *(required for all applications)*

Renewal  
  Change:  
  Endorsements  
  Director  
  Address  
  Other

### 2 SPECIAL INSPECTION AGENCY NUMBER

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### 3 AGENCY INFORMATION *(required for all applications)*

Agency Name	Owner Name	Telephone
Address		
City	State	Zip
		Email

### 4 DIRECTOR INFORMATION *(required for all applications)*

Choose one:  
 PE  
 RA  
 OBI  
 PL  
 FSPC  
 ELEC  
 License #

First Name	Middle Initial	Last Name
Home Address	Social Security No.	Home Telephone
City	State	Zip
		Mobile Telephone
Date of Birth	Title	Email

### 5 TECHNICAL DIRECTOR INFORMATION

Choose one:  
 PE  
 RA  
 OBI  
 PL  
 FSPC  
 ELEC  
 License #                      Title

Name

Choose one:  
 PE  
 RA  
 OBI  
 PL  
 FSPC  
 ELEC  
 License #                      Title

Name

Choose one:  
 PE  
 RA  
 OBI  
 PL  
 FSPC  
 ELEC  
 License #                      Title

Name

Choose one:  
 PE  
 RA  
 OBI  
 PL  
 FSPC  
 ELEC  
 License #                      Title

Name

### 6 SPECIAL INSPECTIONS – Indicate Class 1, 2, or 3 (RCNY 101-06); Indicate whether you are adding or removing (if applicable)

Class	Special Inspections	Code/Section	Add	Remove	Class	Special Inspections	Code/Section	Add	Remove
	Structural Steel – Welding	BC 1705.2.1	<input type="checkbox"/>	<input type="checkbox"/>		Sprayed fire-resistant materials	BC 1705.14	<input type="checkbox"/>	<input type="checkbox"/>
	Structural Steel – Details	BC 1705.2.2	<input type="checkbox"/>	<input type="checkbox"/>		Mastic and Intumescent Fire-resistant Coatings	BC 1705.15	<input type="checkbox"/>	<input type="checkbox"/>
	Structural Steel – High Strength Bolting	BC 1705.2.3	<input type="checkbox"/>	<input type="checkbox"/>		Combustible Exterior Wall Coverings*	BC 1705.16	<input type="checkbox"/>	<input type="checkbox"/>
	Structural Cold-Formed Steel	BC 1705.2.6	<input type="checkbox"/>	<input type="checkbox"/>		Alternative Materials - OTCR Buildings Bulletin #	BC 1705.1.1	<input type="checkbox"/>	<input type="checkbox"/>
	Concrete – Cast-In-Place	BC 1705.3	<input type="checkbox"/>	<input type="checkbox"/>		Smoke Control Systems	BC 1705.18	<input type="checkbox"/>	<input type="checkbox"/>
	Concrete – Precast	BC 1705.3	<input type="checkbox"/>	<input type="checkbox"/>		Mechanical Systems	BC 1705.21	<input type="checkbox"/>	<input type="checkbox"/>
	Concrete – Prestressed	BC 1705.3	<input type="checkbox"/>	<input type="checkbox"/>		Fuel-Oil Storage and Fuel-Oil Piping Systems	BC 1705.22	<input type="checkbox"/>	<input type="checkbox"/>
	Masonry	BC 1705.4	<input type="checkbox"/>	<input type="checkbox"/>		High-Pressure Steam Piping (Welding)	BC 1705.23	<input type="checkbox"/>	<input type="checkbox"/>
	Wood – High-Load Diaphragms	BC 1705.5.1	<input type="checkbox"/>	<input type="checkbox"/>		High Temperature Hot Water Piping (Welding)	BC 1705.23	<input type="checkbox"/>	<input type="checkbox"/>
	Wood – Metal-Plate-Connected Trusses	BC 1705.5.2	<input type="checkbox"/>	<input type="checkbox"/>		High-Pressure Fuel-Gas Piping (Welding)	BC 1705.24	<input type="checkbox"/>	<input type="checkbox"/>
	Wood – Prefabricated I-Joists	BC 1705.5.3	<input type="checkbox"/>	<input type="checkbox"/>		Structural Stability – Alterations of existing buildings	BC 1705.25.1	<input type="checkbox"/>	<input type="checkbox"/>
	Subgrade Inspection	BC 1705.6	<input type="checkbox"/>	<input type="checkbox"/>		Excavations—Sheeting, Shoring, and Bracing	BC 1705.25.3	<input type="checkbox"/>	<input type="checkbox"/>
	Subsurface Conditions – Fill Placement & In-Place Density	BC 1705.6	<input type="checkbox"/>	<input type="checkbox"/>		Underpinning and alternate methods of support of buildings and adjacent property**	BC 1705.25.4 BC 1817	<input type="checkbox"/>	<input type="checkbox"/>
	Subsurface Investigations (Borings/Test Pits)	BC 1705.6	<input type="checkbox"/>	<input type="checkbox"/>		Demolition	BC 1705.25.5	<input type="checkbox"/>	<input type="checkbox"/>
	Deep Foundation Elements	BC 1705.7	<input type="checkbox"/>	<input type="checkbox"/>		Raising and Moving of a Building	BC 1705.25.6	<input type="checkbox"/>	<input type="checkbox"/>
	Helical Piles Foundation	BC 1705.9	<input type="checkbox"/>	<input type="checkbox"/>		Soil Percolation Test - Private On-Site Storm Water Drainage Disposal Systems and Detention Facilities	BC 1705.27.1.2	<input type="checkbox"/>	<input type="checkbox"/>
	Vertical Masonry Foundation Elements	BC 1705.19	<input type="checkbox"/>	<input type="checkbox"/>		Luminous Exit Path Markings	BC1705.35	<input type="checkbox"/>	<input type="checkbox"/>
	Wall Panels, Curtain Walls, and Veneers	BC 1705.20	<input type="checkbox"/>	<input type="checkbox"/>					

\* The 2014 Code inspection "Exterior Insulation and finish System (BC 1704.13)" was expanded to "Combustible Exterior Wall Coverings (BC 1705.16)"

\*\* The 2014 Code inspection "Underpinning (BC 1704.20.3)" was renamed "Underpinning and alternative methods of support of buildings an adjacent property (BC 1705.25.4)"

**6 SPECIAL INSPECTIONS (CONTINUED) – Indicate Class 1, 2, or 3 (RCNY 101-06); Indicate whether you are adding or removing (if applicable)**

Class	Special Inspections	Code/Section	Add	Remove	Class	Special Inspections	Code/Section	Add	Remove
	Private On-Site Storm Water Disposal Systems and Detention Facilities, Installation	BC 1705.27.2	<input type="checkbox"/>	<input type="checkbox"/>		Fire-resistant Penetrations and Joints	BC 1705.17	<input type="checkbox"/>	<input type="checkbox"/>
	On-Site Private Sewage Disposal Systems	BC 1705.28	<input type="checkbox"/>	<input type="checkbox"/>		Aluminum Construction	BC 1705.33	<input type="checkbox"/>	<input type="checkbox"/>
	Sprinkler Systems	BC 1705.29	<input type="checkbox"/>	<input type="checkbox"/>		Flood Zone Compliance	BC 1705.34 BC G105	<input type="checkbox"/>	<input type="checkbox"/>
	Standpipe Systems	BC 1705.30	<input type="checkbox"/>	<input type="checkbox"/>		Post-installed Anchors	BC 1705.37	<input type="checkbox"/>	<input type="checkbox"/>
	Heating Systems	BC 1705.31	<input type="checkbox"/>	<input type="checkbox"/>		Seismic Isolation Systems	BC 1705.12.5	<input type="checkbox"/>	<input type="checkbox"/>
	Chimneys and vents	BC 1705.32	<input type="checkbox"/>	<input type="checkbox"/>		Emergency and Standby Power Systems (Generator)	BC 1705.36	<input type="checkbox"/>	<input type="checkbox"/>

**7 LICENSE USE**

Choose one:  On Behalf of a Corporation  Individual/Sole-Proprietor  On Behalf of a Partnership

**8a CONVICTIONS & FINES (DIRECTOR)**

If you answer **YES** to either of these questions, you **must** complete and attach the LIC34 form.

- YES**  **NO** Have you ever been convicted or pled guilty to an offense anywhere (an offense is defined as a violation, misdemeanor or felony)?
- YES**  **NO** Do you owe any penalties or fines to the City of New York?
- YES**  **NO** Does any company or business you have been associated with under your Department-issued license owe any penalties or fines to the City of New York?

**8b CONVICTIONS & FINES (OWNER)**

If you answer **YES** to either of these questions, you **must** complete and attach the LIC34 form.

- YES**  **NO** Have you ever been convicted or pled guilty to an offense anywhere (an offense is defined as a violation, misdemeanor or felony)?
- YES**  **NO** Do you owe any penalties or fines to the city of New York?
- YES**  **NO** Does any company or business you have been associated with under your Department-issued license owe any penalties or fines to the City of New York?

**9a LICENSING HISTORY (DIRECTOR)**

List all licenses, certifications, or registrations issued to you, by any City or State. Use an additional sheet if you have more than four (4) licenses.

Name	Type	License/Certification/Registration Number	Current Status	Expiration Date

- YES**  **NO** Do you currently have a valid driver's license? State where issued \_\_\_\_\_ License# \_\_\_\_\_
- YES**  **NO** Have any licenses or privileges granted to you or your associated business(es) by the Department of Buildings or any other government entity ever been rescinded, revoked, surrendered or suspended or have you or your related business(es) ever been disqualified from performing inspections?
- YES**  **NO** Have any disciplinary actions ever been taken against you, or any business(es) registered to you by the Department of Buildings or any other certifying authority?
- YES**  **NO** Have any license application(s) ever been denied to you by the Department of Buildings or any other government entity?

If **YES**, please indicate in **Section 9a** the type of License/Certification/Registration Number with the reason for suspension, rescindment, surrender, revocation, denial or disciplinary action.

**9b LICENSING HISTORY (OWNER)**

List all licenses, certifications, or registrations issued to you, by any City or State. Use an additional sheet if you have more than four (4) licenses.

Name	Type	License/Certification/ Registration Number	Current Status	Expiration Date

YES  NO Do you currently have a valid driver's license? State where issued \_\_\_\_\_ License# \_\_\_\_\_

YES  NO Have any licenses or privileges granted to you or your associated business(es) by the Department of Buildings or any other government entity ever been rescinded, revoked, surrendered or suspended or have you or your related business(es) ever been disqualified from performing inspections ?

YES  NO Have any disciplinary actions ever been taken against you, or any business(es) registered to you by the Department of Buildings or any other certifying authority?

YES  NO Have any license application(s) ever been denied to you by the Department of Buildings or any other government entity?

If YES, please indicate in **Section 9b** the type of License/Certification/Registration Number with the reason for suspension, rescindment, surrender, revocation, denial or disciplinary action.

**10a COMMENTS (DIRECTOR)**

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**10a COMMENTS (OWNER)**

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**11 STATEMENTS & SIGNATURES (OWNER)**

As a condition of being granted a License from the Department of Buildings, I agree to comply with, and I agree that the Special Inspection Agency I own will comply with all of the provisions of the New York City Construction Codes, the Rules of the City of New York, and Department Rules, Regulations, and Directives relevant to Special Inspection Agency conduct. Failure by me or by my Special Inspection Agency to comply with the aforementioned Codes, Rules, Regulations and/or Directives may result in disciplinary action against the Special Inspection Agency's License. I understand that falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment or both. I also understand that 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. Such action is punishable by imprisonment or fine or both.

Name (print)	Notarization State of New York, County of:	Notary Seal
Signature	Sworn to or affirmed under penalty of perjury	
	day of 20	
Date	Notary Signature	

**12 STATEMENTS & SIGNATURES (required for all applications)**

By completing and submitting the NYC Special Inspection Agency Registration form, I certify that I am the principal of the agency seeking registration hereunder and that I have the authority to register and make this certification on behalf of the agency. I further certify that I have read the applicable sections of the New York City Construction Codes in connection with this application as well as 1 RCNY 101-06 which specifies the qualifications required for each inspection and that this agency meets those qualifications for each and every special inspection for which registration is sought. I agree to comply and that the agency will comply with all provisions of the New York City Construction Codes and the Rule. I further certify that I am currently pursuing any and all further requirements, anticipated to become qualified, set forth in the Rule in connection with each and every special inspection for which registration is sought. I understand that application for accreditation by International Accreditation Service, Inc. or an equivalent accreditation agency approved by the Department, will entail review of the applicant's satisfaction of legal requirements and any statements made in connection with its application. Furthermore, I hereby agree to furnish and authorize any entity to furnish documents and information in connection with my qualifications pursuant to this Rule to the Department of Buildings upon request. I further certify that I will notify the Department in writing of any information that changes on this application in addition to submitting a new form indicating such changes. I hereby state that the above information is correct and complete to the best of my knowledge.

Name (please print)

Signature \_\_\_\_\_ Date \_\_\_\_\_

PE/RA Seal (apply seal, then sign and date over seal)

Name (please print)

Signature \_\_\_\_\_ Date \_\_\_\_\_

PE/RA Seal (apply seal, then sign and date over seal)

Name (please print)

Signature \_\_\_\_\_ Date \_\_\_\_\_

PE/RA Seal (apply seal, then sign and date over seal)

Name (please print)

Signature \_\_\_\_\_ Date \_\_\_\_\_

PE/RA Seal (apply seal, then sign and date over seal)

Name (please print)

Signature \_\_\_\_\_ Date \_\_\_\_\_

PE/RA Seal (apply seal, then sign and date over seal)

INTERNAL USE ONLY	
Date Received: _____	Fee Paid: \$ _____
Reviewed by: _____	Expiration Date: _____
Comments: _____	