

### Application for Registration of Filing Processor (Expeditor) for Company Owner, Principal or Self Employed (R-01)

**Instructions:** Submit completed form and all attachments electronically.

☐ **Original (\$210)**

Please learn how to apply and pay online from the guide below:

<http://www1.nyc.gov/assets/fdny/downloads/pdf/business/fdny-business-cof-individuals-short.pdf>

☐ **Renewal (\$100, include current R-01 COF # \_\_\_\_\_. ONLY complete section A, B, H, I, unless any information changed from the previous application)**

Please follow the instruction below to renew your COF.

<http://www1.nyc.gov/assets/fdny/downloads/pdf/business/cof-renewal-short.pdf>

Original and renewal fees are for a TWO year period by one of the following methods:

- Credit card (American Express, Discover, MasterCard, or Visa)
- Debt card (MasterCard or Visa)
- E-Check

A convenience fee of 2 % will be applied to all credit/debit card payments. The application fee is non-refundable.

If your application meets all NYC Fire Department (FDNY) requirements, a certificate will be sent to your mailing address within five business days. If your application is incomplete, you will be notified by FDNY, and will have 30 days to resubmit your application without any financial penalty. After 30 days, you will need to submit a new application and pay the application fee again. **All questions must be answered.**

Unless exempted under the languages below, this Certificate of Registration is required for all provisions whether it is done in person, mail or other alternate means.

**FC 116.1 Registration.** No person may submit, file, request, negotiate or otherwise seek approval of applications for issuance of permits, or other approvals, including approval of design and installation documents, without first having obtained an expeditor registration certificate in accordance with this section and the rules. It shall be unlawful to hold oneself out to the public or otherwise represent that one is “registered with the fire department”, or make any similar representation in such a manner as to convey the impression that such person is registered with the department unless such person is registered in accordance with this section.

**Exceptions:** The following persons are exempt from the provisions of this section:

1. Any person or entity making application on his, her or its own behalf. If the applicant is a partnership or corporation, the general partners and principal officers thereof shall be included within this exception. Principal officers of a corporation shall include the presidents, vice presidents, secretary and treasurer.
2. The occupants of a premise that is the subject of the application, if authorized by the owners to file the application.
3. Registered architects licensed by the New York State Department of Education.
4. Professional engineers licensed by the New York State Department of Education.
5. Attorneys admitted to practice in New York State
6. Plumbers when such application relates to work performed under their license.
7. Master fire suppression piping contractors licensed by the Commissioner of Buildings, when such application relates to work performed under their license.
8. Master electricians licensed by the Commissioner of Buildings, when such application relates to work performed under their license.
9. Certificates of license holders, when such application relates to work performed under their license.
10. FLS Director and FEP coordinator certificate of fitness holders when the application relates to the emergency preparedness plan of the building for which they are registered.
11. Managing agents registered with the New York City Department of Housing Preservation and Development or the New York State Secretary of State.
12. Construction site fire safety managers when the application relates to fire safety at a construction site for which such certificate holder provides supervision.

### Section A – Company

**Company Name:**

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Telephone Number:**

**Fax Number:**

1(\_\_\_\_) \_\_\_\_-\_\_\_\_

1(\_\_\_\_) \_\_\_\_-\_\_\_\_

**If your business is located outside of NYC, you must list an Agent for Receipt of Process located in NYC for Judicial OR Administrative Proceedings or Action. (P.O. Box not acceptable, please list a physical mailing address within the five boroughs of New York City that is authorized to receive legal documents if required)**

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

### Section B – Principal or Owner's Contact Information

**Name of Owner or Principals Completing Application:**

**Email Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ @ \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Telephone Number:**

### Section C – Employment History in any NYC Agency

Are you or have you ever been employed by the FDNY or any other City agency in past three years?

☐ Yes

☐ No (skip this section)

If yes, state the agency name and dates of employment:

If yes, have you sought or received approval from the NYC Conflicts of Interest Board? (Attach copy of the ruling)

☐ Yes

☐ No

### Section D – Owner/Principal Professional Experience

Please list work experience for the past 5 years. List most recent experience first & continue backwards in chronological order.

Dates Employed ____/____/____ to ____/____/____	Length of Time Emp'd (years, months)	Employer's Name & Address C of F: _____	Describe your daily duties and responsibilities.

### Section E – Resume (Must attach resume to proceed)

Did you attach a typed copy of your resume?   ☐ Yes

### Section F – Relationships

Expeditors are prohibited by the New York City Conflicts of Interest Law from directly communicating, with respect to with filings or other client matters, with members of their immediate family or household (spouse/partner, child, parent, sibling, other person with financial relationship) who are employed by FDNY. Both you and your family/household member are subject to enforcement action. Your expeditor registration may be suspended, revoked or not renewed. Contact the Executive Director of Public Licensing in writing, if you encounter a situation as to which you have a question.

Are any members of your immediate family or household employed by the FDNY?   ☐ Yes   ☐ No

If yes provide relationship, names, titles, rank, Bureau unit:

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### Section G- Additional Information

List all federal, state, or local licenses or certificates issued to such company, its principals or officers, in the five-year period prior to the date of filing, that authorize the expeditor to engage in a profession, business or other regulated activity. A copy of each such license and certificate shall be included.

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### Section H - Conviction Record

In the past **5 year period**, is there any violations, judgments, convictions and penalties issued to or entered against the registrant in the five-year period prior the date of filing, in connection with applicant's expediting business and activity, any business or activity regulated by the FDNY, or the offering or receiving of a bribe or unlawful gratuity?

☐ Yes (complete this section); ☐ No (skip this section)

List of all violations, judgments, convictions, and penalties below (DO NOT include parking violations), and **attach a copy** of each charge, pleadings, adjudications and certificates of disposition. If you are unsure, list the offense.

Date of Conviction	Type of Offense	Court Name & Location	Sentence/Fine

Add additional sheets, if necessary.

Note: A guilty plea is a conviction even if you were never imprisoned and only fined. You must also disclose if you were conditionally/unconditionally discharged or received a Certificate of Relief from Disabilities. You do not have to disclose any material sealed or set aside under Federal and NY State law, or material pertaining to a youthful offender category. You may not be considered a youthful offender based on your age at the time of the offense.

### Section I – Oath or Affirmance and Acknowledgement

I hereby affirm that:

- all statements are true and could be persecuted under penalty of perjury
- this certificate, if issued, is subject to the requirements of all applicable provisions including Fire Code 116.
- I will notify the FDNY in writing within 24 hours of any changes regarding this form.
- I consent to a background check if requested by the FDNY.

**I have read, viewed, and thoroughly understand all information presented in the file accessed through the link below. Proof attached.**

[http://www1.nyc.gov/assets/fdny/downloads/pdf/business/expeditor\\_tutorial.pdf](http://www1.nyc.gov/assets/fdny/downloads/pdf/business/expeditor_tutorial.pdf)

Signature

Date