<u>Certificate of Fitness Alternative Issuance Procedure</u> <u>C-02 FIRE TRUCK OPERATOR AT LNG (LIQUID NATURAL GAS) PLANT</u>

Applicant Affirmation Form

(Used by Individual Applicants only, PRINT all information requested) This form must be completed by the applicant for the application to be valid.

SECTION 1: EMPLOYER INFORMATION						
Company name:						
Company code:	; 🗆 N/A					
Work address :	City		State	Zipcode		
(The actual work location that this COF will be used for.)						
Name of Designated Coordinator:		; 🗆 N/A				
Email of Designated Coordinat	or:	@			; □ N/A	
Contact phone # of Designated Coordinator:;						
SECTION 2: APPLICANT INFORMATION						
First name:	Last name:	_ MI L	ast 4 digits of S	SSN: XXX-XX-		
Contact phone:	Email:		(a	0		
Mailing address :	City		State	e Zipcode	e	
Experience in the related field: years.						

SECTION 3: DECLARATION

I, _____, hereby certify that certify that I am trained and knowledgeable in the following applicable code/rule and the FDNY study material:

- Fire Department Rule Chapter/Section: §4832-01(d)
- FDNY Study Material: <u>C-02</u>

I understand that I will be subject to all applicable penalties provided by law for a false or fraudulent submission, including suspension, revocation and/or non-renewal of this and other Certificates of Fitness pursuant to FC113 and Fire Department rule 3 RCNY 113-01; and/or other penalties provided by law, rule or regulation with respect to my professional license.

I acknowledge that it is unlawful under New York State and New York City law to make a false statement to the Fire 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, including but not limited to gifts, cash, favors, meals and trips.

I also understand that the Fire Department reserves the right to call up to test the applicants who are issued by AIP. Applicant who has failed the written exam will not be allowed to take advantage of this policy.

On this ______ day of ______, in the year ______, I have hereunto affixed my signature and I certify that, subject to penalty of fine or imprisonment pursuant to the New York State Penal Law and NYC Administrative Code §15-220.1, that the information provided is true and accurate.

 \Box I hereby authorize my employer to represent me before the NYC in connection with my C of F application(s). (Check if your employer is submitting the application for you)

Signature of Applicant:

Date:

SECTION 4: EDUCATION, LICENSE, AND EXPERIENCE REQUIREMENT

(You must attach the copy of the license documentation along with your application)

- \Box Hold a valid driver's license.
- □ Meet **one** of the following requirements:
 - □ <u>Firefighter experience</u> (paid firefighters: at least 2 years; volunteer firefighters: at least 3 years) at any state or any country. Required Documentations to submit:
 - a. letter from Personnel Director including service dates;
 - b. any relevant certificate or license
 - □ <u>Training affidavit</u> on the company letterhead stating that the applicant has participated in and completed the training program in the fire truck operations, the training includes the topics listed in the sample affidavit.

The instructor of this training program must be:

 a person who has been trained directly by the fire truck manufacture (The manufacturer should indicate the names of those who successfully completed the train-the-trainer course on company letterhead. The copy of this letter must be attached); OR

(2) a C-02 COF holder.

This affidavit must be signed by the qualified instructor listed above.

The sample affidavit is provided on the following page.

The sample of affidavit can also be found:

https://www1.nyc.gov/assets/fdny/downloads/pdf/business/c02-affidavit-letter.pdf

SECTION 5: RECOMMENDATION LETTER

The letter must be on official letterhead, must state the applicant's full name, experience and address where the applicant will work. This letter must be signed by a C-01 COF holder (This C-01 COF holder must work at the same LNG plant location and cannot be the same person applying to the C-02 COF) and state that the applicant has been trained for the following content:

• LNG awareness training • Standard First Aid training • Fire drill

The training date must be included. The copy of the C-01 COF card should be attached.

The sample recommendation letter is provided on the following page. The sample of recommendation letter can also be found: <u>https://www1.nyc.gov/assets/fdny/downloads/pdf/business/cof-c02-samplerec-letter.pdf</u>

SECTION 6: PHOTO REQUIREMENT

A recent photo (2x2 head shot) in JPG or JPEG format. File name should be named with applicant's first and last name.

SECTION 7: APPLICATION FEE AND PROCEDURES

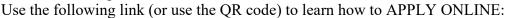
The application and fee for this certificate is **\$ 25**. The application and fee must be submitted online.

Instructions for online application and payment can be found here: <u>https://www1.nyc.gov/assets/fdny/downloads/pdf/business/fdny-business-cof-individuals.pdf</u>

SECTION 8: CHECK LIST OF ALL SUPPORTING DOCUMENTS NEEDED

This check list should be used to review if you have prepared and scanned the following materials that are required to be uploaded to submit your application online:

- □ This completed and notarized affirmation form.
- □ All required documents listed in Section 4.
- \Box A recommendation letter with company letterhead.
- □ A recent photo in JPG or JPEG format.



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

SECTION 9: STATEMENTS & SIGNATURES

I understand that I am legally bound by what is stated in this application and will be responsible for any false statements or inaccurate information. I hereby solemnly swear under oath and subject to penalty of perjury that the information provided by me in this application is true and accurate to the best of my knowledge.

Applicant's print name	Notarization <i>(required for individual applicant)</i> State of New York, county of:	Notary Seal
Applicant's signature	Sworn to or affirmed under penalty of perjury day of 20 Notary Signature	
Date		

C-02 Sample Recommendation Letter

COMPANY NAME BUSINESS ADDRESS

Date:

Fire Department Bureau of Fire Prevention 9 Metro Tech Center Brooklyn, NY 11201-3857

Dear Sir/Madam: I, as a C-01 COF holder (C-01 COF#: ______, the copy of my C-01 Card is also attached), am pleased to recommend ______ (Name of Applicant) to apply for the C-02 Fire Truck Operator at the LNG plant located at:

(Applicant's Work Address)

He/she has ______ (Years/Months) of relevant experience and has obtained all required training regarding the following content on ______ (mm/dd/yy):

- LNG awareness training
- Standard First Aid training
- Fire drill

He also received a training in the operation of installed fire extinguishing system, the fire truck and related equipment on ______(mm/dd/yy) (the training affidavit is attached). I confirm that this candidate has been trained and is capable to serve as a qualified fire truck operator at the LNG plant listed above. This applicant is of good character and is physically able to perform the functions required by the C-02 Certificate of Fitness.

On this ______ day of ______, in the year _____, I have hereunto affixed my signature and I affirm that all statements made on this form are true under the penalties of perjury. I understand that

- all statements made in connection with the application are subject to verification
- any intentional falsification of this letter can be grounds for the denial, non-renewal, suspension or revocation of my C-01 Certificate of Fitness and the C-02 Certificate of Fitness as applies to the applicant.
- FDNY representative may question the C-02 Certificate of Fitness holder as to the required knowledge and skills above to verify their capability during inspection.

(Printed name of C-01 COF holder) (C-01 COF holder's job title) (Signature of C-01 COF holder)

C-02 Sample Training Affidavit

COMPANY NAME BUSINESS ADDRESS

Fire Department Bureau of Fire Prevention 9 Metro Tech Center Brooklyn, NY 11201-3857	Dat	e:
Dear Sir/Madam:		
This affidavit is to verify that	(Name of Applicant) has b	een trained in the fire truck
\Box have been trained directly by the fire true attached)	k manufacturer (the manufactur	e letter is
□ am a C-02 COF holder (COF #:	; the copy of C-02 COF c	eard is attached)
I,	, hereby swear that on	(mm/dd/yy) I have
personally trained		
the following content:		
 Overview of Operations Procedures fo Overview of Duties and Organization of Contents of Truck (Location of portable Operation of vehicle (How to safely operation of Dry Chemical System Normal Discharge of All Hoses, tu Use of connection hoses to suppler Overview of the actuation manifold Knowledge of truck storage location Knowledge of testing performed to ensure 	of Fire Truck le extinguishers, fittings, etc) perate the truck in the facility). rrets, etc ment stationary suppression syst d and connections.	ems.
I hereby certify that the applicant has been train	ned and is capable to operate the	

_____(Applicant's work address) correctly and safely.

_____, in the year ______, I have hereunto affixed my day of On this signature and I affirm that all statements made on this form are true under the penalties of perjury. I understand that

- all statements made in connection with the application are subject to verification
- any intentional falsification of this letter can be grounds for the denial, non-renewal, suspension or revocation of the C-02 Certificate of Fitness.
- FDNY representative may question the C-02 Certificate of Fitness holder as to the required knowledge and skills above to verify their capability during inspection.

(Printed name of instructor)

(Signature of instructor)