

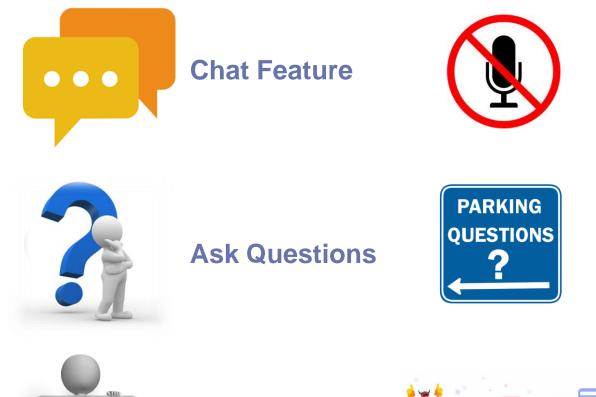
DOB NOW: *Licensing* SUMMER 2022 RELEASE ELEVATOR LICENSING TRAINING

Industry Session



BEST PRACTICES FOR THE VIRTUAL CLASSROOM





Mute Microphones







Participate

Parking Lot



AGENDA

- Overview of Elevator Agency Licenses
- Overview of Elevator Agencies
- Steps to Get an Elevator Agency License
- How to Log In
- Exam Fees
- New License Applications
- License Applications Review Process
- Objections
- Business Application Request
- Getting the License

- Renewal and Reissuance of Licenses
- Additional Transactions
 - Manage Profile
 - Manage License
- Connection to DOB NOW: *Build* and DOB NOW: *Safety*



- Elevator Agency Director
- Elevator Agency Co-Director
- Elevator Agency Inspector
- Elevator Agency Technician
- Elevator Agency Restricted Technician
- Elevator Agency Helper



DOB

- Currently, all Elevator Agency Licenses are filed through DOB NOW: *BIS Options*.
- As of June 25th 2022, all Elevator Agency License related transactions must be submitted in DOB NOW: Licensing.

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Filing Date	Process
Prior to June 25, 2022	DOB NOW: BIS Options
On or after June 25, 2022	DOB NOW: Licensing

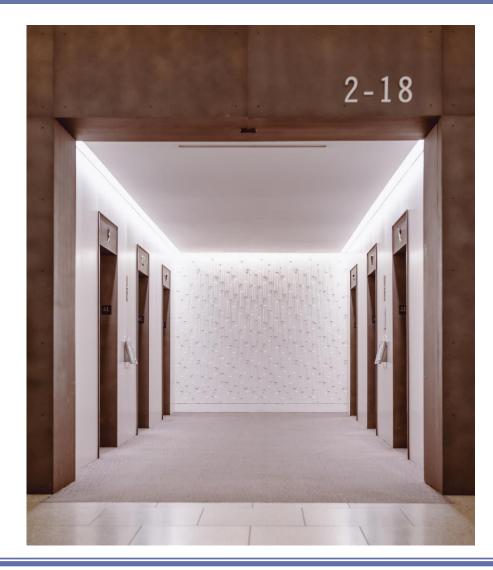


 Each Elevator Agency License has two components, both of which must be valid and active for the license to be active:

DOB

- The License
- The associated Agency
- The **Director** is the highest-ranking license amongst all the elevator agency licenses.
 - The Director is the one who establishes the Agency, and then once established, the other elevator agency licenses will be able to associate themselves to the Agency.





Directors

• There can be only one Director per Agency.

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This license is valid for three years.

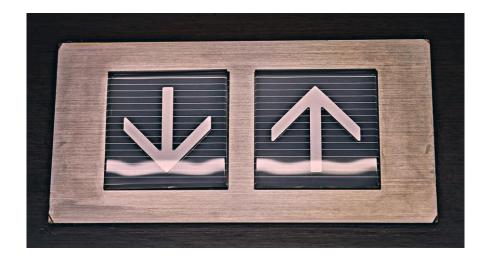
Co-Directors

- There can be more than one Co-Director registered under an Agency.
- Co-Directors cannot create an Elevator Agency within DOB NOW: *Licensing*.
- This license is valid for three years.





- Inspectors perform inspections on elevators and related equipment.
- This license must be associated to a specific Agency.
- This license is valid for three years.
- Technician
 - Technicians perform general maintenance and installation of elevators and related equipment.
 - This license must be attached to a specific Agency.
 - This license is valid for two years.











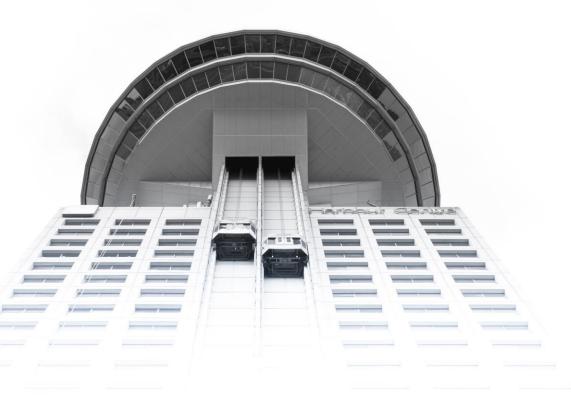
- Restricted Technician (Accessibility Technician)
 - The Restricted Elevator Agency Technician license is restricted to performing work involving platform lifts including those installed in private residences which are covered by the provisions of ASME A18.1.
 - This license must be attached to a specific Agency.
 - This license is valid for two years.
- Helper
 - Helpers work under the supervision of the Technicians and assist or help with maintenance or installations of elevators and related equipment.
 - This license must be attached to a specific Agency.
 - The license does not expire.



ELEVATOR DIRECTOR & AGENCY

- In order to create an Agency, the Director must first
 submit their License Qualification Application LQA. Once the LQA is approved, the system shall
 then prompt the Director to establish the Agency that
 will be tied to their license.
 - Agency can be established by submitting the Business Approval Request – BAR after the LQA is approved.
 - The process for submitting the LQA and the Business Approval Request (BAR) will always be two separate transactions.







ELEVATOR DIRECTOR & AGENCY

- A Director can create a brand-new Agency, or they can join an existing Agency that has already been approved by DOB.
 - If they are creating a new Agency, they will have to provide all the data for the fields and all the relevant documents.
 - If they are associating themselves to an existing Agency, they can search for the Agency by number. Once they find the Agency, the Director can choose to edit the data fields of the Agency record or leave them as they are.

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ELEVATOR DIRECTOR & AGENCY





- After the Agency is approved, any subsequent updates or changes that need to be made to the Agency will only be able to be made by the associated Director.
- An Agency must have one and only one Director associated with it. Without a Director, an Agency is considered inactive. An Agency can have, but need not have, any number of the remaining elevator license types.



- Other elevator agency licenses must submit their LQA and the Agency together in the same request.
 - They need to select the (already approved)
 Agency that they are associating themselves to.
 - These users can search by Agency number from the existing Agencies.









OVERVIEW OF ELEVATOR AGENCIES

Requirements to qualify as a valid Agency



License Type	Elevator Agency Relationship
Elevator Agency Director	 Can file New Agency Business Approval Request (BAR)
	Can Update Agency Information
All other Elevator Agency licenses (Co- Director, Inspector, Technician, Restricted Technician, and Helper)	Must submit LQA to become part of existing Elevator Agency



ELEVATOR AGENCY





For an elevator Agency to be established as a valid Agency, only one type of insurance is required: General Liability.

- The Director can choose to waive either one of the other two insurances: Workers' Compensation and/or Disability.
- If a Director does not include all three insurances for the Agency, no other licensees can join the agency since the wavier of the insurance(s) implies that the Director is working by themself.



DOB NOW

- For all other elevator license types, all three insurances must be active at the time that the prospective applicant chooses the Agency.
- At the time of the issuance of the license, the license expiration date shall not be impacted by the expiration date(s) of the insurance(s).
- If any of the insurances that are associated to an Agency become expired, then all the elevator licenses that are associated to that Agency shall become Inactive-Agency Insurance Expired. Once the insurances are all made active again, then all the licenses associated to that Agency will revert to their original status.



ELEVATOR AGENCY

- An Agency must meet the following criteria for it to be considered active:
 - Have a **Director** with an active license
 - Have General Liability insurance that is active
 - Have Workers' Compensation insurance that is active, unless it's waived
 - Have Disability insurance that is active, unless it's waived







ELEVATOR AGENCY INSURANCE UPDATES

• Currently, Elevator Agency Directors email DOB with updates to insurance information for their Agencies.

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• In the future, Elevator Agency Directors will need to sign into DOB NOW: *Licensing* to enter updated insurance information.

Date	Process
Prior to June 25	Email updates to ElevatorAgencyInsurance@buildings.nyc.gov
On or after June 25	Use Update Insurance Information option in DOB NOW: <i>Licensing</i>

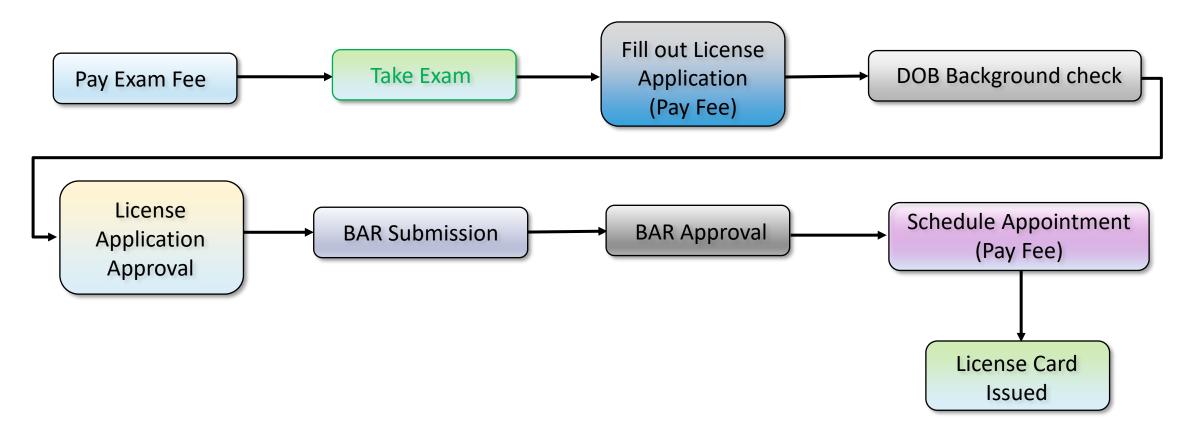




STEPS TO GET AN ELEVATOR LICENSE

DOB NOW

• These are the steps for applying for a license for an Elevator Agency Director.

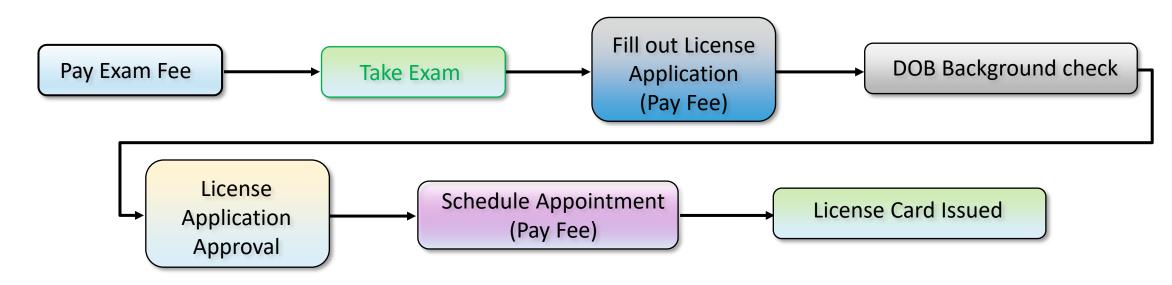




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• These are the steps for applying for a license for an Elevator Agency Co-Director or Inspector.







License Type	Exam Fee Paid	License Application Submission	Background Check	License Application Approval	BAR Approval
Director	Y	Y	Y	Y	Y
Co-Director	Y	Y	Y	Y	Ν
Inspector	Y	Y	Y	Y	Ν

• **Note**: Details for Technicians, Restricted Technicians and Helpers can be found in that presentation.



- New License Application Fee Structure:
 - The **Exam Fee** is due prior to initiating a License Qualification Application.
 - The Background Fee is due prior to submitting a License Qualification Application
 - The License Issuance Fee is due after the license application is approved and before the user comes into DOB to collect the license card.

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License Type	Exam Fee	Background Fee	License Issuance Fee
Director	\$525	\$500	\$100
Co-Director	\$525	\$500	\$100
Inspector	\$525	\$500	\$50





HOW TO PAY FOR THE LICENSE EXAM

Directors, Co-Directors, and Inspectors

 In order to begin a new License application, applicants for *Elevator Director, Elevator Co-Director* or *Elevator Inspector* will first be required to pay the Exam Fee.

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- Users do not need to log in to pay the Exam Fee.
- On the main login page, users can click **Pay Exam Fee**.





HOW TO MAKE AN EXAM PAYMENT



Pay Exam Fee	
Department Of Buildings exam fee.	alaga anto the second states and states a Dev Existence Fee
If you are paying for new please click on New Payment, for Existing New Payment	Existing Payment
For new, please fill the form with required details and pay the fee.	Enter Receipt Number
	Enter Receipt Number
New Payment	Pay Existing Fee

• Users can either make a New Payment or Enter Receipt Number for an existing payment.



HOW TO MAKE AN EXAM PAYMENT



Exam Fee Details		
License Type Elevator Agency	License Class* Select Type:	
Are you taking the exam for the first time?* Yes No		
Email*	Last Name*	First Name*
example@XXXX.com		
Middle Initial	Address*	City*
State*	Zip*	
Select State 🗸		
Phone #*	Date of Birth*	Social Security Number*
	Create Cancel	

Choosing New Payment will open the **Exam Fee Details** pop-up.

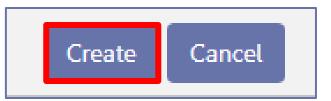


DOB NOW

- Fill out the required fields.
- If users select No for "Are you taking the exam for the first time?", they will need to enter the date of the last exam taken.

Are you taking the exam for the first time?*	What is the date of the last exam taken?*

• Once all required fields are filled out, click **Create**.





HOW TO MAKE AN EXAM PAYMENT

• A pop-up notification will state that the record was created. Click **OK** to continue.



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 A new Proceed to Pay button will appear. Clicking on it will take the user to the CityPay site to pay the Exam Fee.





HOW TO MAKE AN EXAM PAYMENT

DOB NOW

- The system will verify **Exam Application Eligibility**.
- Applicant can now schedule the Exam.
- Once Applicant passes the Exam, they can now submit a submit a License Qualification Application.



DOB NOV

To be eligible to take the Written Examination, Applicants cannot have taken the exam:

- In the last 14 days
- Three or more times in the past six months

Exams are not given by the Department of Buildings but must instead be scheduled through an approved **Exam Vendor**. Applicants must upload their score report as part of the LQA.



HOW TO MAKE AN EXAM RE-PAYMENT

 If an Applicant does not pass the Exam the first time, they will need to make a Re-Payment and re-take the exam.

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• The process for Re-Payment is the same as the process for the original payment.





HOW TO LOG IN TO DOB NOW: LICENSING

- Aspiring Licensees
- Existing Licensees

HOW TO LOG IN: EXISTING LICENSEE OR ASPIRING?

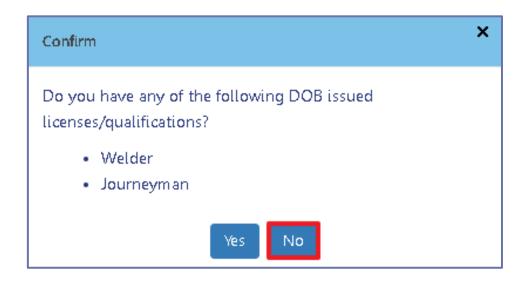
DOB
NOW

Existing Licensee?	Process
Aspiring Licensee	 Users must create a new profile for DOB NOW.
	They can then use the new profile to apply for a license.
Existing Licensee	 Existing licensees who already have an eFiling account as of June 25^{th,}
	2022, can access DOB NOW: Licensing directly with the same email
	address and password, as their profile will be migrated to DOB NOW
	automatically.
	 Existing licensees who do not already have an eFiling account must
	create one in eFiling before June 25 th , 2022, so that their profile can be
	migrated to DOB NOW: Licensing automatically.
	 Existing Elevator Licensees need not create an account in DOB NOW.



HOW TO LOG IN: ASPIRING LICENSEE

- Aspiring licensees must begin by creating a new DOB NOW:
 Licensing profile.
- Click where the red box indicates to create a new profile.
- The system will ask if you have an existing license/qualification. Click No.



unionnai	ur eFiling or DOB NOW: Licensing account ion
Email	
Email	
Passwor	d
Passwo	ord
	Login
eFiling ad	OB NOW: Build or Safety, register for an coount here. To reset your eFiling password, e.
click here	Journeyman_and Gas Work Qualification







Create a profile by

required fields in the

Create Profile screen.

filling out all the

Create Profile – DOB NOW Licensing

First Name*	Middle Initial	Last Name*	Password Requirements
First Name	MI	Last Name	🛷 Must contain atleast 8 characters
Email*			Must contain one lower and uppercase letter
example@XXXX.com			🛷 Must contain one non-alpha and special
Password*			character
Combination of A-Z, a	-z, 0-9 and any special cha	aracters (1 @ #\$)	Must match with password
By checking this box and agree to the ter	and clicking Create (below) ms of the New York City Dep) you are affirming that you ha partment of Buildings.*	we read
Name*	Date	*	



HOW TO LOG IN: ASPIRING LICENSEE

• Create a profile by filling out all the required fields in the **Create Profile** screen.

Statements & Signature

As a condition of being granted a license/registration and/or qualification from the New York City Department of Buildings, I attest that I comply with all New York City Administrative Code and Department rules, regulations, and directives governing how licensees/ registrants/qualification holders conduct their specific trade. I have reviewed the information provided in this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any statement made to the Department is a misdemeanor and that it is also 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 actions are punishable by imprisonment, fine and/or loss of license/registration and/or qualification. In the event of an accident that involves my actions undertaken in connection with my license/registration and/or qualification, 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.

I understand and agree that by personally clicking on the box at left I am electronically signing this application and expressing my agreement with all of its terms. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.*

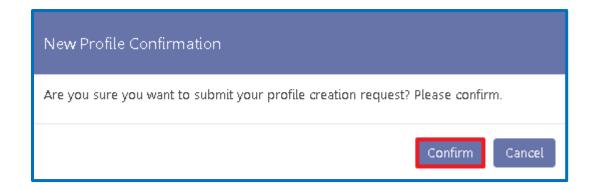
Accept Decline





HOW TO LOG IN: ASPIRING LICENSEE

Click the Confirm button to complete the process and create the New Profile

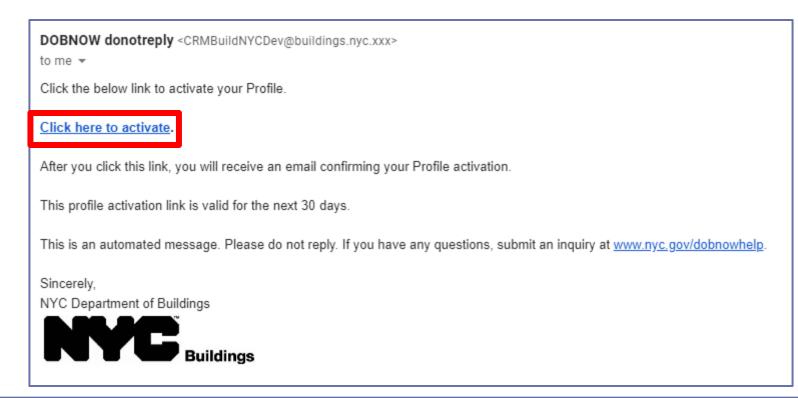


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- Users will receive an email with an activation link.
- Click the link, and you will then be able to log into DOB NOW and see Licensing as an option.

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EXISTING eFiling LOGIN?

PROCESS

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 Existing Elevator Licensees with
 The DOB NOW: Licensing module will

 Existing Elevator Licensees with
 0000

existing eFiling login as of June 25th, 2022 automatically be added to their login.

Existing Elevator Licensees without eFiling login Users will need to sign up for an eFiling account using the link on the main DOB NOW login page June 25th, 2022. Once created, this account will be linked to their license.



HOW TO LOG IN: EXISTING LICENSEE



• After logging in, users will need to select the Licensing Module.

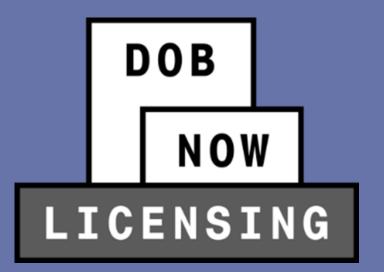
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This will take them to the DOB NOW: Licensing Dashboard.

Buildings	311	Search all NYC.gov websites
DOB DOB NOW NOW Submit Filings, Payments, and Requests to the NYC Department of Buildings LICENSING		Welcome, Elevator License03 elevatorlicense03@gmail.com Last Login: 4/1/2022 11:50:25 AM Need Help? Sign Out
Image My Profile Image My Profile		
My Applications My Requests Business Approval		
		$oldsymbol{\mathcal{G}}$ Refresh
Application Number Application Type License Type License Class/Class Type Application Status Image: I		✓ Applicant of Record ✓ Pay ≡





License Qualification Application Process

In order to create a new license application, click the + New License button to begin the process.

DOB

A + New License	Manage My Profile 🛛 🕂 Busir	ness Approval		
My Applications My Requests Business Approval				
Application Number V	Application Type	Liconso Typo 🗸		
Application Number ~	Application Type ~	License Type ~		



Select the Elevator Agency radio button and then click Next



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- Select the appropriate radio button from the list of choices in the License Class/Class Type list, then click the Next button to proceed.
- Elevator Directors may be created before an Elevator Agency is established or may be associated to an existing Agency.
- All other License Class/Class Types MUST be associated to an existing Elevator Agency.

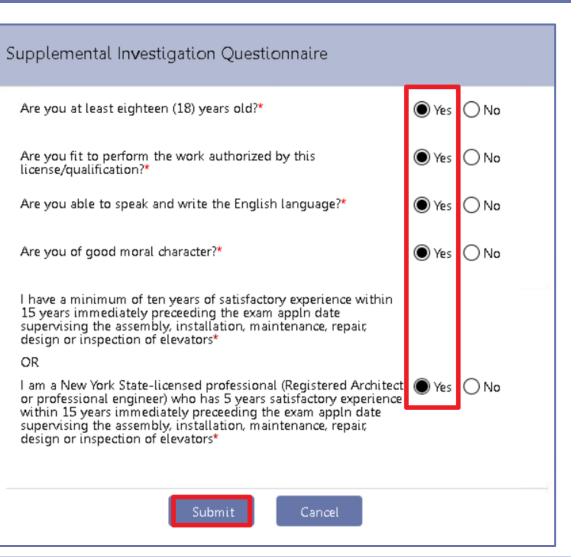


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- Click the Yes radio buttons to all the questions asked on the Supplemental Investigation Questionnaire, and then click the Submit button to proceed.
- If any question is answered No, the Submit button will not be active and the License Qualification Application will not be able to proceed.
- Depending on the License Type, different questions may appear.





Fill in all appropriate information and then click Fischer

Application Information		
Application Type*	License Type*	License Class/Class Type*
New License 🗸	Elevator Agency 🗸 🗸	Elevator Director
Applicant of Record		
First Name*	Middle Initial	Last Name*
Elevator		License
Email*		
elevatorlicense06@gmail.com		
Address		
House Number*	Street Name*	Apartment/Building Number
280	Broadway	
City*	Borough*	State*
New York	Manhattan 🗸	New York 🗸
Zip Code*	Home Telephone*	Mobile Telephone
10007	(212) 874-8774	







Personal Information				
Date of Birth*		SSN/ITIN*		
02/06/2001		XXX-XX-1111		
Agency Information	-			
Agency Number*		Agency Name		Address
055720		GUARDSMAN ELEVATOR CO INC		276,EAST 150TH STREET,BRONX,NY 10451
City		State		Zip Code
BRONX		New York	~	10451
City Employee				
Are you a city employee?*		🔿 Yes 🔘 No		

 All license types other than Elevator Director must enter the Agency Number for an approved Elevator Agency.







- After clicking Save, users will see a Notification that the Application Type cannot be changed after saving. Click Save again.
- Click OK.

Notification	×
Application has been saved.	
ОК	



L00001632

General Information

Background Investigation

Qualifications/Experience

Documents

Statements & Signature

• A License Application number will be assigned.

DOB

- Four more tabs will appear:
 - Background Investigation
 - Qualifications/Experience
 - Documents
 - Statements & Signature



HOW TO A

O APPLY FOR A NE			l	DOB NO
L00001632	License History*			<u> </u>
General Information	🖶 Add History			
Background Investigation	List all licenses, certifications, or regis Name	strations issued to you, by an Type	y City or State. License Nu	
Qualifications/Experience				
Documents				
Statements & Signature				

- Go to the **Background Investigation** tab and then click the **+ Add History** button to enter details of any license, certification, or registration issued to the applicant by any City or State.
- At least one License, Certification, or Registration must be listed in this section.



- For each license, enter:
 - Name
 - Туре
 - License/Certification/Registration Number

Current Status

DOB

- Expiration Date
- Then click Save.

License History			
Name*	Type*		License/Certification/Registration Number*
Current Status*	Expirati	ion Date*	
Select	~		
		Save Save	
		Cancer	



Do you currently have a valid Driver's License? *	🔘 Yes No	
State where Issued*	Driver's License Number*	
Have any licenses or privileges granted to you or your as government entity ever been rescinded, revoked, surrend been disqualified from performing inspections? If Yes ple reason for the suspension, restriction, surrender, revocat	sociated business(es) by the Department of Buildings or lered, suspended or have you or your related business(e ase indicate the type of license/certification/registration ion, or disciplinary action in the Comments. *	any other OYes No s) ever with the

DOB

- If the applicant has a **Driver's License**, they must enter the state and number of the license.
- If any licenses or government-granted privileges have ever been rescinded, revoked, surrendered, suspended or disqualified, the details have to be explained in the Comments.



 In the Personal Information section, users are asked if they have ever been known by any other names. If yes, click the + Add History button to enter any prior names. DOB

 Click Save when done. 		Personal Information	
Personal Information*		Last Name*	
 Add History List of other names you are known by: 		First Name*	
Last Name	First Name	Middle Name	
		Social Security Number*	
		Save Save	





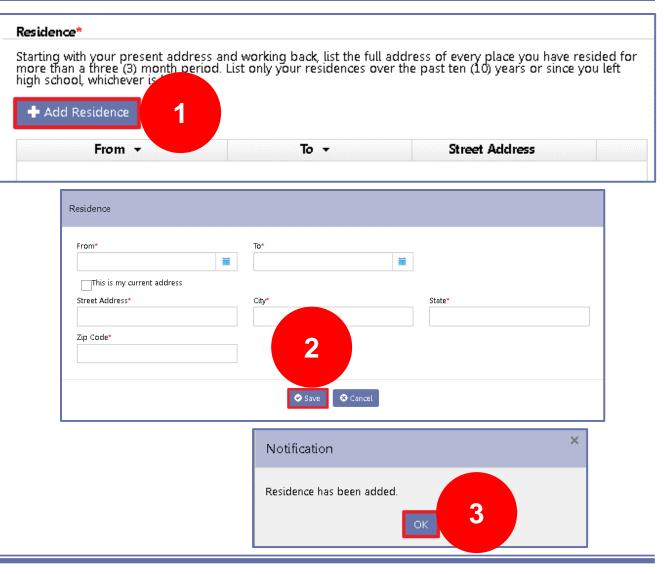
Have you ever been employed by a city, state or federal govt agency? *	🔿 Yes 🔿 No
Are you related to any DOB employee(s) including through marriage? *	🔿 Yes 🔿 No
If you answer YES to any of the questions in this section, you must provide complete details, specifying the date, a	agency, reason, disposition, etc. in the Comments box.
Comments	
500 characters remaining	

- Answer the Yes/No questions about whether the Applicant has worked for a city, state or federal government agency and whether they are related to any DOB employee(s).
- Any YES answers, either here or above, must be explained in the Comments field.



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- Applicants must enter the full address of all residences where they have lived for 3 or more months in the past 10 years (or since they graduated high school, whichever is less).
- Click the + Add Residence button.
- Enter the most recent address information and click Save.
- Click OK to complete the process.
- Repeat as many times as necessary.





- Click on the Qualifications/Experience tab.
- Answer the three Yes/No questions about Convictions and Fines.

🗎 Save 📄 Preview to File		
L00001632	Convictions and Fines	
General Information	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
Background Investigation	Does any company or business you have been associated with under your Department-issued license owe any fines,	() Yes () No
Qualifications/Experience	penalties or fees to the City of New York that were incurred during your association with that company or business?*	0
Documents	Employment History*	
Statements & Signature	Add Employment History	

DOB



- Applicants must enter employment history for each job they wish to use as Qualifying Experience.
- Click the + Add Employment History button and enter work history, starting with the current job and then going in *reverse chronological order*.



DOB

-			
- Add Empl	loyment History		
Start with you	r current job and list the emp	loyment history for each	job you intend to use as a
Start with you Qualifying Exp verification:	ir current job and list the emp perience. You must provide a v	loyment history for each /alid Supervisor(s) Teleph	job you intend to use as a one Number for experience
Start with you Qualifying Exp verification:	Ir current job and list the emp perience. You must provide a v	loyment history for each /alid Supervisor(s) Teleph	job you intend to use as a one Number for experience



 Enter all required information on the Employment Information tab.

Date Employed From*	Date Employed To*	
]
This is my current job		
Company Name*	Street Address*	City*
State*	Zip Code *	Country*
Select 🗸		
Ownership Interest (%)*		
Is the company still in business?		
is the company star in business?		
Supervisor(s) Name*	Supervisor(s) Title*	Supervisor(s) License Type*
Supervisor(s) Name*		
	Supervisor(s) Title*	Supervisor(s) License Type*
Supervisor(s) Name*		
Supervisor(s) Name* Supervisor(s) License Number*		
Supervisor(s) Name* Supervisor(s) License Number*		
Supervisor(s) Name* Supervisor(s) License Number*		

DOB



Employment History Information				
Employment Information Wages Detail				
Applicant Title*		Time Period*		Wages Per Hour*
Hours Per Week*				
	Descrit	e Type of Work Performed*		
	25	O characters remaining		
Applicants Name	Time Period	Hours Per Week	Wages P	Per Hour Actions
	<	Save Save		

 On the Wages Detail tab, enter Title, Time Period, Wages per
 Hour, Hours per Week, and
 Description of Type of Work
 Performed.

DOB

- Click Add.
- Repeat for other titles held at that company.
- Click Save to complete entry.



DOB NOW

- On the Documents tab, click
 + Add Document to see the list of documents.
- All potential documents can be seen in the drop-down menu under Document Type.
- Enter a Document Name and select the appropriate
 Document Type for each document to be uploaded.

LO	0001632	Required Documents/Qualifications
Ger	neral Information	Required Documents/Qualifications
Bac	kground Investigation	🛨 Add Document
Qua	alifications/Experience	Document Name
Do	Upload a Document	
Sti	Document Name*	
	Document Type*	
	Select	
	Select	
	Experience Verification Affida	istration ng program for limited gas ling of and proficiency and competency with gas work wit /Social Security History of Earnings
		Upload Cancel





Upload a Document		
Document Name*		
Experience Affidavit		
Document Type*		
Experience Verification Affidavit		~
Document Choose File No file chosen		
	Upload Cancel	

- Click Choose File to navigate to the document on your computer.
- Click Upload to complete the upload process for the document.



- The document will appear in **Pending** status on the Documents tab.
- The Actions buttons allow users to view or delete an uploaded document.
- Repeat the process for all required documents.

Required Documents/Qualifications			
+ Add Document			
Document Name	Document Type	Document Status	Actions
Experience Affidavit	Experience Verification Affidavit	Pending	

DOB





L00001632	Applicant of Record - Statements & Signa	turo					
General Information	Applicant of Record - Statements & Signa						
Background Investigation	License Application*						
Qualifications/Experience		ualification from the New York City Department of Buildings, I attest that I comply with all New York I directives governing how licensees/ registrants/qualification holders conduct their specific trade.					
Documents		, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any					
Statements & Signature	Statements & Signature statement made to the Department is a misdemeanor and that it is also unlawful to give to a city employee, or for a city employee to accept, any benefit, monoportion or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Such actions are punishable by imprisonment, and/or loss of license/registration and/or qualification.						
	In the event of an accident that involves my actions undertaken in connection with my license/registration and/or qualification, 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.						
	understand and agree that by personally clicking on the box at understand that this electronic signature shall have the same vali	t left I am electronically signing this application and expressing my agreement with all of its terms. I idity and effect as a signature affixed by hand.*					
	Name	Date					

• On the Statements & Signature tab, the Applicant must click the checkbox to Sign the application.





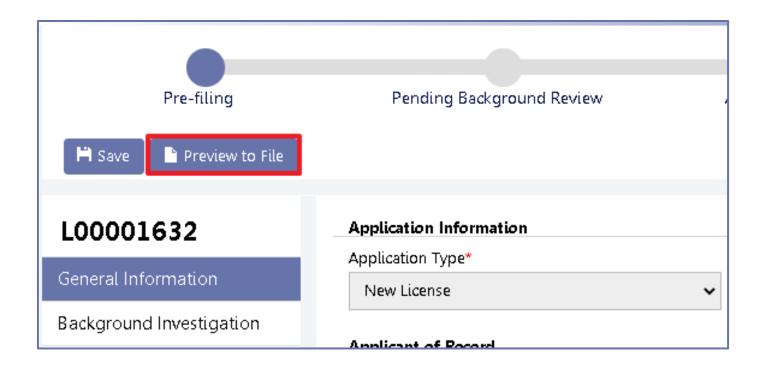
Click the Pay Now button at the bottom of the toolbar on the right to make the fee payment.

Pre-filing	Approved, License Issuance Pending Background Review Approval Letter Sent Pending License Card Issued	Dashboard				
L00001632 General Information	Applicant of Record - Statements & Signature	View Filing				
Background Investigation	License Application*	3				
Qualifications/Experience	As a condition of being granted a license/registration and/or gualification from the New York City					
Documents	specific trade.	3				
Statements & Signature	I have reviewed the information provided in this application and, to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any statement made to the Department is a misdemeanor and that it is also unlawful to give to a city employee, or for a city employee to accept, any	Payment History				
	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/registration and/or qualification.	\$500.00 Pay Now				



Click on the **Preview to File** button to submit your License Qualification Application.

Note: You may have to go back and fill in any information you might have missed.



DOB



- After the Application Preview window opens, review the entire application and page through the preview by clicking the Next button.
- Click the checkbox to sign the filing,

and then click File.

Application Preview	« Previous	Next »	Q Zoom	Q Zoom	100% 🗸	Page :	1 / 6
DOB Now Licensing						NYC Buildings	^

Name:	Elevator License09 (Electronically Signed)	Dat	Xe:	11/18/2021	_
I understand application an have the same	and agree that by pers d expressing my agreeme validity and effect as a si	sonally clicking on t ent with all of its term ignature affixed by ha	he box a is. Lunder ind.	at left I am eleo stand that this el	ctronically signing this ectronic signature shall
	evator License09 ctronically Signed)	Date	11/18/2	2021	
	🛹 File	C Return to Applicat	ion View		







LICENSE REVIEW PROCESS

LICENSE REVIEW PROCESS

- The License Review Process for Elevator Directors includes the Business Application process by default.
- Directors can choose to attach themselves to existing Elevator Agencies or to create new Elevator Agencies.

		Qualification Approved -			
		Business Application		Approved, License Issuance	
Pre-filing	Pending Background Review	Pending	Approval Letter Sent	Pending	License Card Issued

- The steps are:
 - Pre-filing
 - Pending Background Review
 - Qualification Approved Business Application

Pending

- Approval Letter Sent
- Approved, License Issuance Pending

DOB

NOW

License Card Issued



LICENSE REVIEW PROCESS

The License Review Process for Elevator Co-Directors and Elevator Inspectors goes through:

DOB

- Pre-filing
- Pending Background Review
- Approval Letter Sent
- Approved, License Issuance Pending
- License Card Issued







RESPONDING TO OBJECTIONS

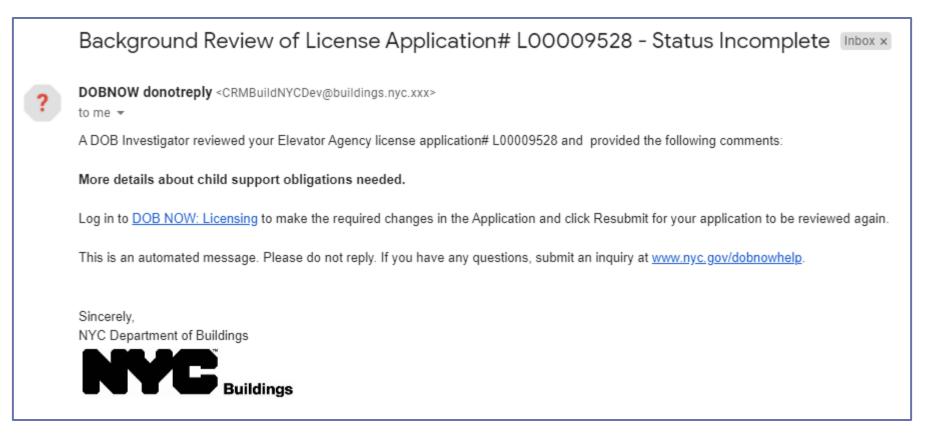


- The Inspections Unit has three options for responses to License Applications
 - Non-Adverse: This means that the License Application can move forward to the next step in the process.
 - Adverse: The License Application cannot be granted with the information given. This decision is final, and the Applicant must submit a new License Application to be considered again.
 - Objections: This response means that there is some issue with the License Application that must be addressed by the Applicant before the Application can move forward.



RESPONDING TO OBJECTIONS

If there is an Objection raised on a License Application, the Applicant will receive a notification email.





A new Objections tab will display the Objection(s) raised by the Licensing Investigator. Click the drop-down
arrow to see comments.

DOB

NOW

L00009528	Objections	
General Information	Objections	
Background Investigation	Objection	Action
Qualifications/Experience	Further documentation required, Supplemental documentation requested.	C Edit
Documents		
Objections		
Statements and Signature		



RESPONDING TO OBJECTIONS



- Add any additional Comments in the Comments box.
- Click Update.
- Add documents or otherwise update License Application as needed.
- Resubmit updated License Application.

Objection	Action
 Further documentation required, Supplemental documentation requested. 	🖺 Update
Objection Details	
Comments* Add supplemental documentation about Child Support obligations.	
192 characters remaining	
Objection History	





DOB NOW

- Elevator Agency License Types other than Directors will join an existing Elevator Agency.
- An Elevator Director's License Qualification Application contains an additional step: Qualification
 Approved Business Application Pending.
- When the license request reaches that point, the Elevator Director can begin the process to either establish a new Elevator Agency or join an existing Agency.







DOB NOW LICENSING	DOB NOW Submit Filings, Paymer	nts, and Requests to	o the NYC Department of Buildings
A New Lice	ense 📃 👤 Manage My Profile	+ Business Approval	
My Applications My	y Requests Business Approval	i	

• On the DOB NOW: *Licensing* main dashboard, click + **Business Approval** and enter the approved

License Qualification number.

Business Approval Request
Enter the approved License Qualification number that is associated to this Business Approval application.*
Submit Cancel



• Applicants are first asked if they are joining an existing agency or establishing a new agency.

New or Existing Agency Are you creating a new agency or are you joining an already approved existing agency? * O New Agency O Existing Agency

• If they are joining an existing Agency, they can search by Agency Number.

Aç	gency Search	
	Search by Agency Number: *	
	Enter Agency Number	Q Search
Aç	gency Information	







Agency Information		
Agency Name*	Agency Number	Agency Address*
City*	State*	Zip*
	~	
Business Telephone*	Business Type*	
	Select Type: 🗸 🗸	

If they are creating a **new Agency**, they must fill in all information about the Agency.



B	usiness Type*
	Select Type:
	Select Type:
—	Corporation Limited Liability Company (LLC)
	Partnership
	Sole Proprietor
-5	Individual



- Click Save.
- Then click Yes to confirm.



- The Business Type can be:
 - Corporation
 - Limited Liability Company (LLC)
 - Partnership
 - Sole Proprietor
 - Individual









Click + Add to enter Partner or Officer Information.

Partner or Officer Information*		
+ Add		

- Partner or Officer Information

 Name*

 Street Address*

 City*

 Image: State*

 Select:

 Vip*

 Phone*

 Icense Number

 % Control*

 Title(s)*

 Image: Save

 Save

 Save
- Enter all required information and then click

Save.





• Continue until all required **Partners** or **Officers** have been added.

+ Add				
Name	Street Address	License Number	% Control	Actions
Elevator License02	280 Broadway		50	8 1
Other Director	280 Broadway		50	6 1





Insurance Information*		
General Liability Insurance*		
General Liability Insurance Policy Number*	Policy Start Date*	General Liability Insurance Expiration Date (mm/dd/yyyy)*
Broker Information*		

 Enter General Liability Insurance Information. General Liability Insurance is always required for Elevator Agencies.



 If they are not waived, Workers Compensation Insurance and Disability Insurance information must be entered.

Workers' Compensation Insurance		
Is the Workers' Compensation Insurance waived?*	🔿 Yes 🔵 No	
Disability Insurance		
Is the Disability Insurance waived?*	🔿 Yes 🔵 No	

Workers Compensation Insurance and **Disability Insurance** may only be waived for Sole Proprietorship Elevator Agencies. If there is more than one worker, the Agency must have both types of insurance along with General Liability Insurance.





Workers' Compensation Insurance		
Is the Workers' Compensation Insurance waived?*	🔿 Yes 🔘 No	
Workers' Compensation Insurance Policy Number*	Workers' Compensation Insurance Start Date (mm/dd/yyyy)*	Workers' Compensation Insurance Expiration Date (mm/dd/yyyy)*
Broker Information*		
Disability Insurance]	
Is the Disability Insurance waived?*	🔿 Yes 🔘 No	
Disability Insurance Policy Number*	Disability Insurance Start Date (mm/dd/yyyy)*	Disability Insurance Expiration Date (mm/dd/yyyy)*
Broker Information*		

Enter Policy Number, Start Date, Expiration Date, and Broker Information for each Insurance.





C	Comments					
		_				
	500 characters remaining					

- There is an optional **Comments** field at the bottom of the **General Information** tab.
- Click Save before moving to the Documents tab.



- In the **Documents** tab, users may upload:
 - NYS Certificate of Incorporation
 - Filing Receipt or Certificate of Good Standing
 - Minutes stating the names of the elected officers
 - General Liability Insurance Certificate
 - Worker's Compensation Insurance
 Certificate or Waiver
 - Disability Insurance Certificate or Waiver

Upload a Document
Document Name*
Document Type*
Select 🗸
Select NYS Certificate of Incorporation Filing Receipt or Certificate of Good Standing Minutes stating the names of the elected officers
General Liability Insurance Certificate Workers' Compensation Insurance Certificate(**) Disability Insurance Certificate (**)
Upload Cancel



 The applicant must click the checkbox to sign the Business Approval Request in the Statements & Signature tab.

Statements & Signature

Applicant's Statement*

I have read and I understand all the items contained in this application. 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.

have personally reviewed all information entered in this application and on each of the documents listed herein. I understand and agree that by personally clicking on the box at left I am electronically signing each document listed herein and expressing my agreement with the Statements and Signatures terms for such documents and all other statements herein. I understand that this electronic signature shall have the same validity and effect as a signature affixed to each document and statement by hand.

Name

Date

DOB

NOW





BAR00001036

🖹 Submit

General Information

Documents	i
-----------	---

💾 Save

Statements & Signature

- There is **no fee** to submit a Business Approval Request.
- Click Submit and then click Yes to confirm.







My Applications My Requests Business Approval									
						C Refresh			
Actions	Tracking Number	Business Type	Request Type	Business Approval Request Status	Created Date	Modified Date			
2	BAR00001053	Corporation	New Agency	Approved	01/27/2022	01/27/2022			

- The request will show up on the **Business Approval** tab of the Licensing Dashboard.
- Once the QA Review is complete, the applicant will be notified, and the License Request will move forward to allow the applicant to schedule an appointment to come to DOB to receive their license.





GETTING THE LICENSE

 Once the License Qualification Application is approved, the Applicant will receive a letter notifying them of that fact.

DOB

NOW

License Application L00012036- Approved Inbox ×			ē	Ø
DOBNOW donotreply <crmbuildnycdev@buildings.nyc.xxx> to me ▼</crmbuildnycdev@buildings.nyc.xxx>	10:09 AM (4 minutes ago)	☆	*	:
Your license card for a NYC DOB Elevator Agency license L00012036 has been Approved. You will receive a ne days.	ew license card in the mail withi	n 10 bı	isiness	
This is an automated message. Please do not reply. If you have any questions, submit an inquiry at <u>www.nyc.go</u>	//dobnowhelp.			
DOB NOW Support NYC Department of Buildings				





+ New License Anage My Profile + Business Approval + Exam Payment									
My Applications My Requests Business Approval									
							\Im Refresh		
Application Number	Application Type 🗸 🗸	License Type V	License Class/Class Type ×	Application Status V	Applicant of Record 🗸 🗸	Payment Status 🛛 🗸	Mod ≡		
L00001638	New License	Elevator Agency	Elevator Technician	Approval Letter Sent	Elevator License09	Due	11/18/20:		

- The Application Status will be Approval Letter Sent.
- If a payment is due at this time, it will be visible on the DOB NOW:
 Licensing Dashboard.
- Double-click on the License details on the dashboard to open the application in order to make the payment. Click OK on the popup.





GETTING THE LICENSE





- Click the Pay Now button at the bottom of the right toolbar to make a payment.
- Next, schedule an appointment by clicking on the Appointments tab and then clicking the +Schedule Appointment button.

L00008604	Appointments			
General Information	11			
Background Investigation	+ Schedule Appointment			
Qualifications/Experience	Subject	Time	Status	Action
Documents				
Appointments				
Statements and Signature				



GETTING THE LICENSE



- The New Appointment window will open.
- Select an Appointment Date from the calendar and then select an Appointment Time from the drop-down menu.
- Click Schedule.
- Click Yes to Confirm.



New Appointment							
Application Number :	L000086	04					
Selected Date :	02-09-20	22 (MM	-DD-YYY	YY)			
Select Appointment Date :*	<		Fe	bruary 20	22		>
	Mon	Tue	Wed	Thu	Fri	Sat	Sun
	31	01	02	03	04	05	06
	07	08	09	10	11	12	13
	14	15	16	17	18	19	20
	21	22	23	24	25	26	27
	28	01	02	03	04	05	06
	07	08	09	10	11	12	13
	Holida	<u>iys</u>	Fully I	Booked D	ates		
Select Appointment Time :*	Select:						~
	🛗 So	chedule	8 C:	ancel			





Appointments				
+ Schedule Appointment				
Subject	Time		Status	Action
Subject	Time 2/9/2022 2:00:0	00 PM	Status Scheduled	Action

 The appointment details will be listed on the tab. If there is a need to cancel the appointment, it can be done from here.



 Your card will be issued at the appointment scheduled with DOB. If a picture is necessary, it will be taken during that appointment.

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RENEW LICENSE, REISSUE LICENSE, UPDATE INSURANCE AND MORE



Licenses can be renewed. To do so, License Holders will hover over the Manage My Profile button on the main DOB NOW: *Licensing* dashboard and choose Manage License.

- This will take them into a screen where they can see any licenses they have that are issued by DOB, and choose Renew, Reissue or More.
- Licenses can be renewed:

- Starting 60 days before expiration
- Up to 1 year after expiration

Elevator Agency		611558	
License Expiry Date :	06/17/2025		
License Class/Class Type :	Elevator Director		
Agency Number :	56122		
License Status :	Active		
Renew Update/Add	nsurance More - S	Show info	





Renewal	 The system first asks if this is a Renewal 		
Renewal with Change? *	With Change.		
Next Cancel	Renewal		
If Yes, identify the change(s):	Renewal with Change? *		
 Co-Director Change (Director only) 	Renewal with:*		
Change to different Agency	Co-director Change Change to different Agency		
 Update – Add Insurance (Director only) 	Update-Add Insurance Update Agency Information		
 Update Agency Information (Director only) 	Next Cancel		





Supplemental Investigation Questionnaire	
Are you at least eighteen (18) years old?*	• Yes O No
Are you fit to perform the work authorized by this license/qualification?*	● Yes ○No
Are you able to speak and write the English language?*	● Yes ○ No
Are you of good moral character?*	● Yes ○No
Submit Cancel	

- Next, the Supplemental Investigation Questionnaire
 - appears, with the same questions as are seen on the initial license application.
- All questions must be answered Yes in order for the Submit button to become active.





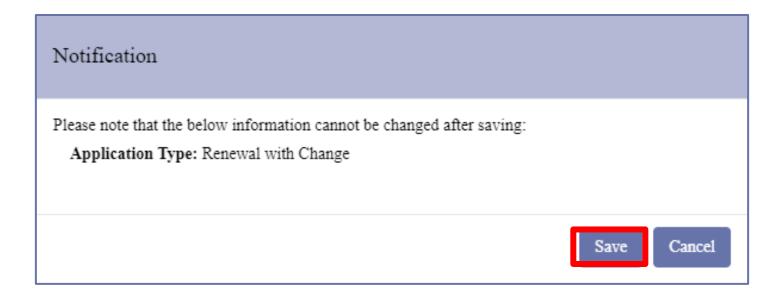
H Save		
General Information	Application Information	
	Application Type*	
	Renewal with Change	~
	License Number*	
	610769	

- The Application will appear with the Application Type identified as either Renewal without Change or Renewal with Change.
- All fields in the **General Information** tab will be auto filled with the information from the prior license.
- Click **Save** to continue.





- A pop-up Notification will inform the Applicant that the Application Type cannot be changed after saving.
- Click Save.







L00009479

General Information

Background Investigation

Qualifications/Experience

Documents

Statements and Signature

- An Application Number will be assigned, and four more tabs will appear on the left:
 - Background Investigation
 - Qualifications/Experience
 - Documents
 - Statements and Signature
- The information from the initial License Application will be autofilled. Users should fill in all new or updated information, including uploading any required documents and Signing the Application.



- The fee for a License Renewal is:
 - \$150 for Director or Co-Directors
 - \$75 for Inspectors
 - **\$50 Late Fee** if renewed under 30 days before expiration
- Once the fee has been paid, users can click Save and then
 Preview to File.
- Review the Application and then Submit.











Pre-filing	Pending Background Review	Pending QA Review	Approved	License Card Issued

- The review process for a License Renewal is:
 - Pre-Filing
 - Pending Background Review
 - Pending QA Review
 - Approved
 - License Card Issued



REISSUE LICENSE

Elevato	r Agency			611558
		06/17/20 Elevator I 56122 Active		
Renew	Update/Add Ir	nsurance	More -	Show info
				or Change different Agency gency Information

- A Supplemental Investigation Questionnaire will pop up.
- All questions must be answered Yes for the Submit button to become active.

 To Reissue a license, click the Reissue button on the Manage License page.

Supplemental Investigation Questionnaire				
Are you at least eighteen (18) years old?*	● Yes ○ No			
Are you fit to perform the work authorized by this license/qualification?*	● Yes ○ No			
Are you able to speak and write the English language?*	● Yes ○ No			
Are you of good moral character?*	● Yes ○ No			
I have a minimum of seven (7) years of satisfactory experience within the ten (10) years immediately preceding the exam application date in the assembly, installation, repair, design of inspection of elevators or as an elevator mechanic.*	0 0			
Submit Cancel				



REISSUE LICENSE

 Applicants will be brought into a Reissue Request, where they must identify why they are requesting Reissue. Options are:

DOB

- Their ID Card was stolen
- They lost their ID Card
- They never received their ID Card in the mail

Application Information	
Application Type*	License Type*
Reissue 🗸	Elevator Agency 🗸
License Number*	Reason for Reissue*
610751	Select 🗸
	Select
Applicant of Record	Their ID Card was stolen
represent of record	They lost their ID Card
First Name*	They never received their ID Card in the mail



REISSUE LICENSE



L00001665

General Information

Background Investigation

Qualifications/Experience

Documents

Statements & Signature

- The other details on the General Information tab will be auto filled from the original license request and cannot be changed.
- Once the user clicks Save, a Request Number will be generated, and new tabs will be added:
 - Background Information
 - Qualifications/Experience
 - Documents
 - Statements & Signature
- All information will be auto filled from the original license request, but the Reissue Request must be signed by the applicant.





- There is a \$50 fee for Reissuing a license.
- Once the request is filled out and the fee has been paid, the applicant can click Preview to File to submit the Reissuance Request.
- The approval process for Reissuing a license is as follows:
 - Pre-filing
 - Pending Background Review
 - Reissue Approved
 - License Card Reissued

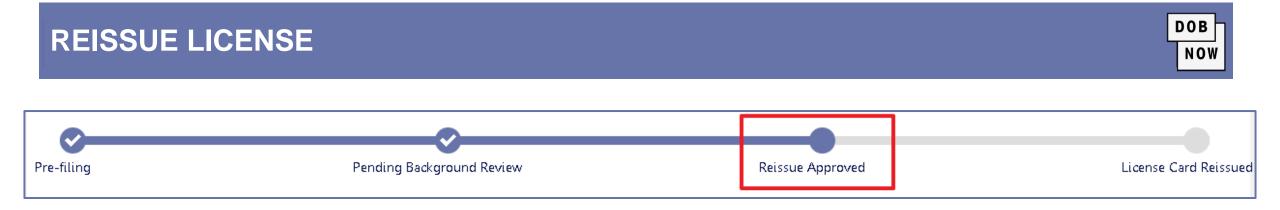




• Users will see a new License Application on the My Applications tab of DOB NOW: Licensing.

♠ ♣ New License	🕻 Manage My Profile 🛛 🕂	Business Approval 🛛 🕂 Exam Payr	nent	
Applications My Rec	quests Business Appro	val Exam Payment		
				\mathcal{C} Refree
Application Number 🗸 🗸	Application Type	License Type 🗸 🗸	License Class/Class Type	 Application
.00001665	Reissue	Elevator Agency	Elevator Inspector	Pending QA Review





- The reissue request must go through QA approval first.
- Once the request has reached the Reissue Approved status, the applicant must schedule an appointment to come to DOB to get their new card.
- The appointment process is the same as for getting a new license.



CHANGES



Elevator Agency			611558
License Expiry Date : License Class/Class Type Agency Number :	06/17/20 : Elevator [56122		
icense Status :	Active	_	
Renew Update/Add	Insurance	More 🕶	Show info
		Reissue	
		Co-direc	tor Change
		-	to different Agency

- Options in the More drop-down will depend on the License Class.
- Directors have the most options. They can opt for:
 - Co-director Change
 - Change to Different Agency
 - Update Agency Information
 - Update/Add Insurance







- The three options can be combined. Which options are shown depends on the initial selection.
- Click **Next** to continue.

Change	
Change with: Co-director Change Update Agency Information	Change to different Agency
Next	Cancel



CHANGES



Supplemental Investigation Questionnaire		
Are you at least eighteen (18) years old?*	⊖ Yes	O No
Are you fit to perform the work authorized by this license/qualification?*	⊖ Yes	O No
Are you able to speak and write the English language?*	⊖ Yes	O No
Are you of good moral character?*	⊖ Yes	O №
I have a minimum of seven (7) years of satisfactory experience within the ten (10) years immediately preceding the exam application date in the assembly, installation, repair, design of inspection of elevators or as an elevator mechanic.*	0	() No
Submit Cancel		

- The Supplemental Investigation
 Questionnaire window will appear.
- All questions must be answered Yes in order for the Submit button to become active.







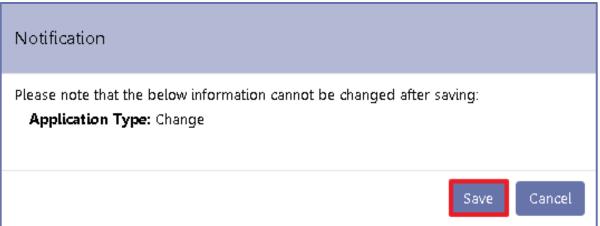
- For Change to a different Agency, the license information will appear.
- For Co-Director Change or Update Agency Information, the Agency information will appear.
- All information in the General Information tab will be pulled from the original license and it will be read only. No changes can be made.
- Click Save.





CHANGES

- A notification window will pop up. Click Save.
- The rest of the License Request or Agency Information tabs will appear.
- The applicant must re-attest in the Statements & Signatures tab, as well as updating all other information that needs to be updated.











- There is no fee for these changes.
- Click Preview to File, page through the application, and attest by clicking the checkbox. Then click File.
- The request goes through QA review before approval.

Pre-filing	Pending QA Review	Approved
🗎 Save 📄 Preview to File		



• A Director can also create a new agency in the **Change to Different Agency** transaction.

New or Existing Agency	
Are you creating a new agency or are you joining an already approved existing agency?*	O New Agency Existing Agency
Change to different Agency	

DOB



- The last option in the More drop-down menu is Update/Add Insurance.
- This must be used to update or add insurance for the Elevator Agency.

Elevator Agency		611558
License Expiry Date :	06/17/2025	
License Class/Class Type :		
Agency Number :	56122	
License Status :	Active	
Renew Update/Add Ir	nsurance More -	Show info



- In the General Information tab, enter the information on the insurance policies.
- The Elevator Agency Director must attest in the Statements & Signature tab.

General Information			
Documents	Update Insurance Agency Information		
Statements & Signature	Agency Name* ELV & CO	Agency Number 55747	Agency Address* 100 PARK PLACE

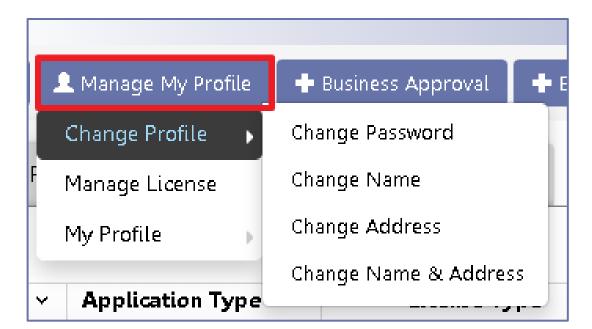


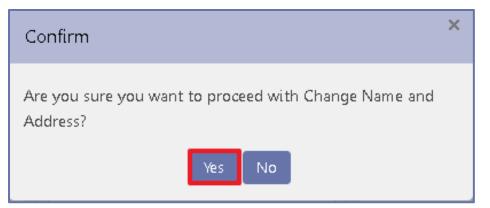


UPDATING LICENSE HOLDER INFORMATION



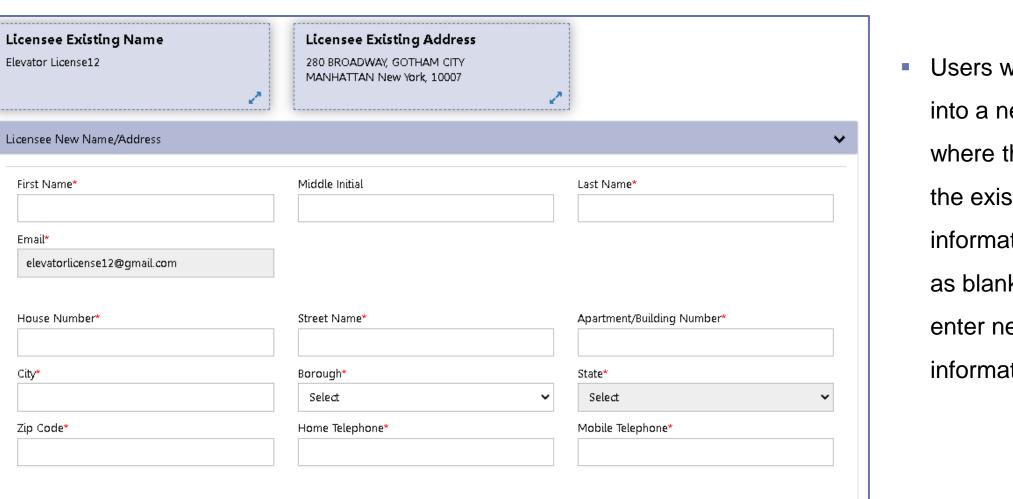
- To update the user's name and/or address, hover over the Manage My Profile button on the dashboard and select Change Profile.
- From there, users can select:
 - Change Password
 - Change Name
 - Change Address
 - Change Name & Address
- Choosing one of the options will result in a confirmation pop-up window. Click Yes.







UPDATING LICENSE HOLDER INFORMATION



Users will be brought into a new window where they will see the existing information as well as blank boxes to enter new information.

DOB



🂾 Save		
General Information	Licensee Existing Name Elevator License12	Licensee Existing Address 280 BROADWAY, GOTHAM CITY MANHATTAN New York, 10007
	Licensee New Address	
	House Number* 280	Street Name* Broadway

NOW

• Once all information has been updated, click **Save**.



- A Request Number and two more tabs will appear:
 - Documents
 - Statements & Signature





UPDATING LICENSE HOLDER INFORMATION



Upload a Document	
Document Name*	_
Document Type*	
	~
Select Proof of Name Change Proof of Residence (utility bill, lease, or deed) or a typed notarized letter and bill from the person you are residing	g wit
Upload Cancel	

 In the Documents Tab, users must upload Proof of Name Change and/or Proof of Residence.



• The License holder must attest to their update request by clicking the checkbox.

Statements & Signature	
City Administrative Code and Department rules, regulations, and I have reviewed the information provided in this application and, statement made to the Department is a misdemeanor and that it or otherwise, either as a gratuity for properly performing the and/or loss of license/registration and/or qualification. In the event of an accident that involves my actions undertaken i Code requires that I cooperate with any investigation and that fai	alification from the New York City Department of Buildings, I attest that I comply with all New York directives governing how licensees/ registrants/qualification holders conduct their specific trade. to the best of my knowledge and belief, attest to its accuracy. I understand that falsification of any is also unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary job or in exchange for special consideration. Such actions are punishable by imprisonment, fine n connection with my license/registration and/or qualification, I understand that the Administrative lure to do so may result in immediate suspension, revocation or other disciplinary action. left I am electronically signing this application and expressing my agreement with all of its terms. I dity and effect as a signature affixed by hand.*
Name	Date

DOB



UPDATING LICENSE HOLDER INFORMATION



- **Save** the request.
- There is a fee of \$50 that must be paid before the change request can be submitted. Click on the Pay Now button on the bottom of the right menu bar to make the payment.



DOB



Pre-filing	Pending QA Review	Approved	License Card Issued
🛱 Save 🌓 Preview to File			

- Click Preview to File to submit the Request.
- The applicant must review the filing and re-attest to complete the submission process, just as we saw in the initial License application.
- The request must go through QA Review before a new License Card can be issued.





ELEVATOR JOB APPLICATIONS AND INSPECTIONS REPORTS

- When filing Job Applications in DOB NOW: Build or Inspection Reports in DOB NOW: Safety, the system will pull information about existing Elevator Agency Licensees from DOB NOW: Licensing with this release.
- This means, for example, when entering the details of the Elevator Inspector who will be responsible for the Inspection Report, all relevant data about their license will be automatically pulled over from their entry in DOB NOW: *Licensing.*
- Therefore, it is vital that all license holders keep their information up-to-date in DOB NOW: *Licensing* in order to make sure that their Job Applications and Inspection Reports have the correct data.

	Application Number:
	Filing Rep. Name:
ELV1: Elevator Application	Filing Rep. Reg.:
Please file three (3) copies Application must be typewritten	Filing Rep. Email:

	Date DOB notified of:
ELV3: Elevator Inspection / Test Report ^{Must be typewritten}	1 Year Escalator Test
	3 Year / Water Hydraulic Elevator Test
	5 Year Elevator Test
	Hoist Jump/Down & 90DayTemp Renewal





NO PAPER. NO LINES.



DOB NOW LICENSING

NO PAPER. NO LINES.

QUESTIONS?