## <u>Certificate of Fitness for Professional Certification of the</u> <u>Installation of Fire Alarm Systems – S-87</u>

(Used by Individual Applicants only. <u>COMPLETE</u> all information requested) This form must be completed by the applicant for the application to be valid.

## **SECTION 1: APPLICANT INFORMATION**

(You must attach the copy of the documentation along with your application, see section 6)

| Company name:   |                       | ·   |          |
|---|-----------------------|---|----------|
| Company address: _  | ·                     |   |          |
| City  | State                 | Zip Code  |          |
| Name of Applicant:  | <del></del>           |   | ;        |
| ☐ Professional Engi   | neer $\square$ Regist | stered Architect $\square$ NICET Level III or IV holder $\underline{\sf and}$ S | S-97 COF |
| ☐ Master NYC Elect  | rician $\square$ Spe  | ecial NYC Electrician   |          |
| Email :   |                       | ;   |          |
| Contact phone #:  |                       |   |          |
| Last 4 digits of SSN: Mailing address:                                      |                       |   |          |
| City  | State                 | Zip Code  |          |
| Meet <u>ONE</u> of the fol<br>1. NYS Professional E<br>☐ I hold a current P | Engineer Licens       |   |          |
| Name:   | P.E.                  | . license number:;  |          |
| Exp Date:   |                       | ;   |          |
| 2. NYS Registered Ar  ☐ I hold a current R                                  |                       |   |          |

|  | R.A. license number: _  | ;                                  |              |
|--|---|------------------------------------|--------------|
|  | ;   |                                    |              |
|  | IV certificate holder in fire alarm sy t NICET III/IV certificate.  | /stems (Must have a&b <b>or</b> a& | c)           |
|  | NICET Level III/  | IV certificate number:             |              |
|  | ;   |                                    |              |
| b. Are you ar  | n S-97 holder?  |                                    |              |
| ☐ Yes, S-9   | 97 #  |                                    |              |
| c. I am not a  | n S-97 holder, but the S-97 holder I  | below endorses my S-87 appli       | cation.      |
| l,   |   | am the S-97 holder fo              | r            |
|  | Name of S-97 holder   |                                    |              |
|  |   | My S-97 COF # is                   |              |
|  | e that my S-97 is being used for this   |                                    |              |
| S-87 COF i   | e that my S-97 is being used for this<br>s revoked, no one else from the co<br>e of Fitness.  |                                    |              |
| S-87 COF i   | s revoked, no one else from the co  |                                    |              |
| S-87 COF i<br>Certificate  | s revoked, no one else from the co<br>e of Fitness.  Signature of S-97 holder   | mpany will be allowed to rece      |              |
| S-87 COF i<br>Certificate<br>4. NYC Master Ele   | s revoked, no one else from the co<br>e of Fitness.   | mpany will be allowed to rece      |              |
| S-87 COF i<br>Certificate<br>4. NYC Master Ele   | s revoked, no one else from the co<br>e of Fitness.  Signature of S-97 holder ectrician License holder  | mpany will be allowed to rece      | eive an S-87 |
| S-87 COF i Certificate  4. NYC Master Ele  I hold a curren  Name:                                | s revoked, no one else from the co<br>e of Fitness.  Signature of S-97 holder ectrician License holder t NYC Master Electrician license.                                    | mpany will be allowed to rece      | eive an S-87 |
| S-87 COF i Certificate  4. NYC Master Ele  I hold a curren  Name:                                | s revoked, no one else from the co e of Fitness.  Signature of S-97 holder ectrician License holder t NYC Master Electrician license.  NYC Master Electrician  ;            | mpany will be allowed to rece      | eive an S-87 |
| S-87 COF i Certificate  4. NYC Master Ele  I hold a curren  Name:  Exp Date:  5. NYC Special Ele | s revoked, no one else from the co e of Fitness.  Signature of S-97 holder ectrician License holder t NYC Master Electrician license.  NYC Master Electrician  ;            | mpany will be allowed to rece      | eive an S-87 |
| S-87 COF i Certificate  4. NYC Master Ele I hold a curren Name: Exp Date: S. NYC Special Ele     | s revoked, no one else from the co e of Fitness.  Signature of S-97 holder  ectrician License holder t NYC Master Electrician license.  NYC Master Electrician  ; ectrician | n license number:                  | eive an S-87 |

## **SECTION 2: DECLARATION**

| By signing this form, I hereby certify the following conditions: |  |  |  |  |  |
|--|--|--|--|--|--|
| l,   | , and hereby certify that I am a current Licensed Professional           |  |  |  |  |
| (Architect/Professional Engineer                                 | , NICET- Level III/IV, NYC Master Electrician or NYC Special Electrician |  |  |  |  |
| as indicated in Section 1 above. I                               | certify that I am trained and knowledgeable in the following codes,      |  |  |  |  |
| rules, and standards.  |  |  |  |  |  |

- NYC Fire Code and Rules: FC Chapter 9 and Rules §104-02, §104-04, and §105-01
- National Fire Protection Association Standards:
- NYC Building Code
- NYC Electrical Code
- All other laws, rules and regulations applicable to installations of fire alarm systems including prior codes and standards.

I understand that the purpose of the S-87 Certificate of Fitness is to authorize professional certification for fire alarm installation in accordance with the 2022 Fire Code and Fire Department rule 3 RCNY 104-02. By signing a professional certification for fire alarm installation, I will be representing that the fire alarm installation fully complies with all applicable requirements including, but not limited to, the Building Code, Fire Code, Electrical Code, and NFPA standards. I also certify that the fire alarm system is installed in accordance with FDNY approved plans. I personally will submit all documents to the FDNY to ensure the integrity of all submitted documents.

I understand that such certification will be made pursuant to my Professional License/certification and the S-87 certificate. I also understand that the certification is being made in place of a Fire Department inspection. Accordingly, the Fire Department, building owner and the public is relying on my certification that the fire alarm system has been installed in accordance with all applicable NYC codes and standards.

I understand that all professional certifications for fire alarm installation are subject to audit. 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 understand that I will notify the FDNY within 24 hours of my Professional License or professional certification expiring. I understand that I may not submit any application once my license/certification (NYS P.E./R.A., NICET Level III/IV, NYC Master Electrician or NYC Special Electrician) is expired.

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 New York City employee, or for a New York 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 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.

| SECTION 3: NYC EMPLOYEES  |
|---|
| I. Are you currently employed by a NYC government agency?   |
| ☐ Yes ☐ No  |
| If yes, you are responsible for seeking approval from the NYC Conflict of Interest Board for permission for private employment if you are an active New York City government employee. (Exception: not required for New York City government employee who is submitting on behalf of the agency.) |
| II. Has it been at least one (1) year since your NYC employment separation date? $\hfill\Box$ Yes $\hfill\Box$ No   |
| If no, you are responsible for seeking and obtaining written approval from the NYC Conflict of Interestant for permission.  |
| SECTION 4: 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 5: 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:

https://www.nyc.gov/assets/fdny/downloads/pdf/business/fdny-business-cof-individuals.pdf

## **SECTION 6: CHECKLIST OF ALL SUPPORTING DOCUMENTS NEEDED**

|                           | aded to submit your application     | repared and scanned the following mate<br>on online:   | erials that |
|---------------------------|-------------------------------------|--|-------------|
|                           | cation or license listed in Section | ion 1  |             |
| ☐ A recent photo in JPC   |                                     | 1011 1.  |             |
| • ,                       | or use the QR code) to APPLY O      |  |             |
| http://www1.nyc.gov/a     | ssets/fdny/downloads/pdf/bus        | <u>ısiness/fdny-business-cof-individuals-sh</u>  | ort.pdf     |
| SECTION 7: STATI          | EMENTS & SIGNATURES                 |  |             |
| responsible for any false | e statements or inaccurate info     | I in this application and all contents will ormation. I hereby swear under oath ar me in this application is true and accu | nd subject  |
| Applicant's print name    |                                     | _  |             |
| Applicant's signature     |                                     | _  |             |
| Date                      |                                     | _  |             |
|                           |                                     |  |             |