



## **ELEVATOR INSPECTOR LICENSE APPLICATION**

Elevator Examining Board City Hall, Room 121-B 30 Church Street Rochester, New York 14614

## **Summary of Instructions**

To obtain an Elevator Inspector's Certificate of Registration:

- Complete the attached application and submit it with the required application fee payable to City of Rochester, Treasurer, to the Building Permit Office, Room 121-B, 30 Church Street, Rochester, New York 14614. Forms of payment include; money order, personal check, Visa /MasterCard and cash (please do not send cash in the mail). The required application fee of \$100.00 is due at the time of application.
- Submit proof that you meet the minimum requirements established for licensing. These requirements are described below. Read carefully the instructions for references and documentation found later in this brief.

Questions about when a certificate is required, qualifications for licensing, fees, penalties, etc., can be answered by contacting 585-428-9339, online at <u>cityofrochester.gov</u>, by going to the Building Permit Office, Room 121-B, City Hall, or by obtaining the Elevator Code Book Chapter 50.

#### **Minimum Requirements for Registration**

The Elevator Board of the City of Rochester requires that each applicant for Elevator Inspector License have these minimum applicable requirements for licensing:

- 1. Applicant shall make an application to the Rochester Elevator Examining Board detailing appropriate experience and shall possess and maintain a current Qualified Elevator Inspector (QEI) Certification.
- 2. Applicant must demonstrate an acceptable combination of experience and education credits. Five 5 years (@1750 hours per year) work experience in the elevator industry in construction, maintenance and service or repair, and this must be verified by current and previous employers.
- 3. Applicant must submit a certificate of insurance from an insurance company license to do business in the State of New York as evidence of insurability in levels as specified by the Commissioner of Neighborhood and Business Development.





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City of Rochester Elevator Examining Board City Hall, Room 121-B, 30 Church Street, Rochester, New York 14614

Name (Last)	First		M.I.	QEI	License Number	Exam Da	te
Address					City/State/Zip		
Home Phone	Cell Phone				E-Mail		
Licensing Information							
Have you ever had an Ele f yes, when?	evator Inspector's lice	nse denied, suspe	ended or	revok	ed? (	) Yes ( )	No
Do you currently hold an I f yes, where?	Elevator Inspector's li	•	er state?	( )	Yes ( ) No		
am currently a:  ( ) Sel	f-Employed Inspecto	r ( ) Employed	l Inspect	or			
Education		( , , ,	•				
Name			City & State		Years Completed	Year Graduate	
High School							
College							
Correspondence Night Sc	:hool						
Business/Trade/Military/Other							
Employment						1	
For applicants who are inspector, list your emp							n Elevator
A. Employer's Name			Start Date – End Date		Hours Per Week		
Address		City/State/Zip		Phone i		Number	
B. Employer's Name			Start Date - End Date   I		Hours Per Week		
Address		City/State/Zip			Phone Number		
C. Employer's Name				Start D	Pate – End Date	Hours Per Wee	k
Address		City/State/Zip			Phone Number		
D. Employer's Name		l		Start D	Pate – End Date	Hours Per Wee	k
Address		City/State/Zip			Phone Number		

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_





## PROOF OF EXPERIENCE INSTRUCTIONS FOR ELEVATOR INSPECTOR

City of Rochester Elevator Examining Board City Hall, Room 121-B, 30 Church Street Rochester, New York 14614

Applicants who gained all or part of their elevator experience working for contractors, your proof of experience must consist of one letter of reference from each employer you worked for in the last five years.

#### IT IS YOUR RESPONSIBILITY TO:

- 1. Fill in the employer's name, address, and your name on the reference letter for each employer. Copies are included in this package, please make more if needed.
- 2. For each employer, have a supervisory-level person (foreman, superintendent, owner) answer the questions and then sign and date in the date provided.
- 3. Make sure that the reference letters are returned by the employer to the Board.

#### **Notes to Remember**

- No action will be taken on your application until the required number of reference letters are returned to the Board.
- If you wish to claim credit for classroom training hours toward the minimum experience requirements, you must furnish the Board with a diploma, certificate, or affidavit that describes the type and length of the training. The Board may at their discretion, allow partial credit for this training.





# REFERENCE LETTER FOR ELEVATOR INSPECTOR LICENSE

City of Rochester Elevator Examining Board City Hall, Room 121-B, 30 Church Street Rochester, New York 14614

<i>(Please Print)</i> Name of Reference	Contact Number:			
Address:	City/State/Zip			
Dear Reader:				
The following person has applied to the Elevator Examin City of Rochester.	ing Board for an <b>Elevator Insp</b>	ector License for use in the		
NAME OF APPLICANT:				
One of the conditions for licensing is that the applicant nexperience requirements established by the Board for Ingained all or part of his/her experience while working as of a letter of reference from a supervisory-level person (employed the applicant over the required period.	<b>spector License</b> . For the mech a mechanic/inspector, the rec	nanic /inspector who quired proof must consist		
The Board requests each employer to answer the following while he/she was employed by your firm.	ing questions about the applic	ant's work experience		
1. The above applicant was employed by us as an Eleva	1A. (Month/Year) to			
2. During the period of time noted in <b>1A</b> above, the approximation how many hours per week as an Elevator Mechanic/	Hours Per Week			
3. During the period of time noted in <b>1A</b> above, the approximately how many total hours?	Total Hours			
4. In your judgment, is the applicant qualified to do the applied for?	( )YES ( )NO			
It is the applicant's responsibility to furnish these letters until the required number of reference letters are return				
DATE				
Signature of Reference	sory Position			
Please put any comments you care to add on the bar Board at the above address. Thank you for your comments at the above address.	ack of this letter and mail to operation.	the Elevator Examining		





# REFERENCE LETTER FOR ELEVATOR INSPECTOR LICENSE

City of Rochester Elevator Examining Board City Hall, Room 121-B, 30 Church Street Rochester, New York 14614

(Please	Print)					
Name of Reference		Contact Number:				
Address	s:	City/State/Zip				
Dear Re	eader:					
	lowing person has applied to the Elevator Examinin Rochester.	g Board for an <b>Elevator Inspe</b>	ector License for use in the			
NAME	OF APPLICANT:					
experie gained a letter	the conditions for licensing is that the applicant much ence requirements established by the Board for an I all or part of his/her experience while working as a of reference from a supervisory-level person (foreing and the applicant over the required period.	<b>nspector License</b> . For the me mechanic/inspector, the req	chanic /inspector who uired proof must consist of			
	ard requests each employer to answer the following was employed by your firm.	g questions about the applica	nt's work experience while			
1.	The above applicant was employed by us as an Ele	vator Inspector from:	1A. (Month/Year) to			
2.	During the period of time noted in <b>1A</b> above, the a average of how many hours per week as an Elevat	Hours Per Week				
3.	During the period of time noted in <b>1A</b> above, the a approximately how many total hours?	Total Hours				
4.	In your judgment, is the applicant qualified to do t license applied for?	( )YES ( )NO				
	e applicant's responsibility to furnish these letters or e required number of reference letters are returned		• •			
DATE						
	Signature of Reference	ory Position				
Please Board	put any comments you care to add on the bac at the above address. Thank you for your coor	k of this letter and mail to t	he Elevator Examining			