



CITY OF WHITE PLAINS
DEPARTMENT OF BUILDING

7-11 South Broadway - Suite 100, White Plains, New York 10601

Phone: (914) 422 - 1269 * Fax: (914) 422 - 1471

Reset Form

<http://www.ci.white-plains.ny.us/building/building.htm>

Print Form

STATIONARY ENGINEER'S / REFRIGERATION OPERATORS'S ANNUAL LICENSE:

Please check off as applicable:

New Application (Fee \$100.00)

Annual Renewal (Fee\$50.00)

Re-Examination (Fee\$50.00)

To: The Commissioner of Building

Date: _____

The undersigned hereby makes application for (check appropriate box or boxes):

Chief Engineer's License

1st Class Engineer's License

2nd Class Engineer's License

Refrigeration Operator's License

Applicant Name : _____

Name of Company : _____

Residence: _____

Address: _____

Home Phone : _____

Phone: _____

Cell Phone : _____

EXPERIENCE: Under headings given below, give details of each plant in which experience has been obtained. Begin with your most recent employment.

LENGTH OF EMPLOYMENT

FROM: MO _____ **YR.** _____

TO: MO _____ **YR.** _____

TOTAL: YRS. _____ **MOS.** _____

PLANT OWNER: _____ **ADDRESS:** _____ **CITY / STATE:** _____

PLANT TYPE: _____ **H.P. OF HIGH PRESSURE BOILER:** _____

NATURE OF DUTIES: _____

TONNAGE OF REFRIGERATION SYSTEM: _____

LENGTH OF EMPLOYMENT

FROM: MO _____ **YR.** _____

TO: MO _____ **YR.** _____

TOTAL: YRS. _____ **MOS.** _____

PLANT OWNER: _____ **ADDRESS:** _____ **CITY / STATE:** _____

PLANT TYPE: _____ **H.P. OF HIGH PRESSURE BOILER:** _____

NATURE OF DUTIES: _____

TONNAGE OF REFRIGERATION SYSTEM: _____

LENGTH OF EMPLOYMENT

FROM: MO _____ **YR.** _____

TO: MO _____ **YR.** _____

TOTAL: YRS. _____ **MOS.** _____

PLANT OWNER: _____ **ADDRESS:** _____ **CITY / STATE:** _____

PLANT TYPE: _____ **H.P. OF HIGH PRESSURE BOILER:** _____

NATURE OF DUTIES: _____

TONNAGE OF REFRIGERATION SYSTEM: _____

STATIONARY ENGINEER'S / REFRIGERATION OPERATORS'S ANNUAL LICENSE: (CONTINUED)

LENGTH OF EMPLOYMENT

FROM: MO _____ **YR.** _____

TO: MO _____ **YR.** _____

TOTAL: YRS. _____ **MOS.** _____

PLANT OWNER: _____ ADDRESS: _____ CITY / STATE: _____

PLANT TYPE: _____ H.P. OF HIGH PRESSURE BOILER: _____

TONNAGE OF REFRIGERATION SYSTEM: _____

NATURE OF DUTIES: _____

Has applicant a license elsewhere? _____ If so, where and what kind? _____

Proof of employment, in writing , must accompany application. (Signed) _____ Applicant

Please bring proof of license, if any, when you appear for examination.

STATE OF NEW YORK }
 COUNTY OF WESTCHESTER }

_____ being duly sworn, disposes and says: that he/she is the applicant above named and that the statements contained
 (PRINT APPLICANT NAME)
 herein are true to the best of his/her knowledge and belief.

Applicant Sworn Before Me This _____ Day of _____ 20 _____

_____ Signature of Applicant

_____ NOTARY PUBLIC

FOR EXAMINING BOARD USE ONLY!

I hereby certify that the Board of Examiners recommends the { licensing / rejection } of the above applicant as a
 {Chief Engineer} {1st Class Engineer} {2nd Class Engineer} {Refrigeration Operator}.

I hereby recommend the {granting / refusal } of a _____ to the above applicant.

(Signed) _____, Examiner. Date: _____

License No: _____

THE FOLLOWING DOCUMENTS MUST ACCOMPANY THE APPLICATION:

1. Three (3) 2x2 full face color or Black & White photographs.
2. One(1) letter of qualification and experience on printed business stationery from employer.
3. Two (2) character reference letters from someone other than family, co-worker and not a generic computerized letter.
4. Check or money order for the amount due payable to the City of White Plains.
 - a) New Application Fee \$100.00.
 - b) Annual renewal Fee \$50.00.
 - c) Re-Examination Fee \$50.00
5. Application must be notarized.
6. A CFC Universal license is required for the Refrigeration license. (Note: Submit original, a copy will be made when application is filed.)
7. Annual renewals are required no later than January 31st of the new year or you will be required to take the Test again.
 - a) Two (2) 2x2 full face color or Black & White photographs.
 - b) Check or money order for \$50.00 payable to the City of White Plains.