



Phone: 607.432.6450
Fax: 607.433.3420
Internet Address:
www.oneonta.ny.us
E-Mail Address:
cityinfo@oneonta.ny.us

OFFICE OF THE CITY CLERK

City Hall, 258 Main Street
Oneonta, NY 13820-2589

An application for a **New** (first time) **Fire Suppression Contractor's License** in compliance with Ch. 210 of the Code of the City of Oneonta, New York.

The undersigned hereby makes application for a Fire Suppression Contractor's License for the calendar year 2018 in the City of Oneonta, New York, and agrees to comply with all the applicable sections of the Code of the City of Oneonta as indicated above and submits the following facts in support thereof:

Application Date: _____

Type of License Applied for: _____

Name of Applicant: _____
PLEASE PROVIDE FULL NAME

Date of Birth: _____

Company/Business Name: _____

Business Address: _____

Business Telephone: _____

Business Email: _____

Do you have in your possession a letter of approval issued by the Examining Board of Plumbers of the City of Oneonta, NY? Yes _____ No _____

I passed the Air Conditioner Contractor examination on: _____

Type of Exam: _____

ALL APPLICATION FEES ARE NON-REFUNDABLE.
ALL NEW APPLICANTS MUST COMPLETE RELEASE OF RECORDS FORM.

A Certificate of Contractors' Liability Insurance, with a minimum coverage of \$300,000 combined liability and property damage, is required and must be submitted with the application. Note: This is a separate requirement from Worker's Compensation coverage.

Proof of Worker's Compensation coverage is required, and must be submitted if you have employees working under your license. Otherwise, you must provide a completed waiver. Please visit: <http://www.wcb.ny.gov> to obtain your NYS WC/DB Exemptions Form CE-200.

Any person employed under a Master License **MUST** carry with them at all times an identification card issued by the City Clerk.

The names and dates of birth of the Journeymen and/or Apprentices who will be working under your supervision need to be provided, as they require cards for the year 2016. The fee for each Apprentice or Journeyman card is \$25.00.

Application for a **New (first time) Fire Suppression Contractor's License**
(page 2)

Name(s) and Date(s) of Birth of Apprentice(s):

_____	_____
Name	Date of Birth
_____	_____
Name	Date of Birth
_____	_____
Name	Date of Birth
_____	_____
Name	Date of Birth

A Journeyman shall be issued an identification card only after proof of four (4) years' experience as an apprentice or an equivalent of enough years in the field. A Journeyman must be approved by the Code Enforcement Officer and City Clerk (proof of eligibility must be submitted). If the journeyman is part of a reciprocal license application, they do not require formal approval.

Name(s) and Date(s) of Birth of Journeyman/Journeymen

_____	_____
Name	Date of Birth
_____	_____
Name	Date of Birth
_____	_____
Name	Date of Birth
_____	_____
Name	Date of Birth

Licenses will not be processed unless the completed application and fee (\$125.00), the applicable Journeymen and/or Apprentice application(s) and fee(s) (\$25.00 each) and your liability and workers compensation insurance documents requirements have been submitted.

Signature of Applicant _____
Date

Fee of \$125.00 for each Master
Fee of \$ 25.00 for each Apprentice/Journeyman

Total fee amount: _____

Date received: _____

Received by: _____