NEW YORK STATE Department of Labor
WORKING FOR YOU

Application for Contractors to Request Approval to Hire Temporary Elevator Mechanics Licensed by NYSDOL

A NYSDOL licensed elevator contractor who encounters a shortage of licensed elevator mechanics may use this application to request approval to hire temporary elevator mechanics licensed by NYSDOL.

Submit completed forms to: industry.dosh@labor.ny.gov.

Business Name: _____

FEIN: _____

NYSDOL Elevator Contractor License Number: _____

Business Address: _____

Mailing Address (if different from physical address):

_____

Contact Information for Individual Submitting This Application

First and Last Name: _____

Phone Number: _____

Email: _____

Number of Licensed Elevator Mechanics the Business Currently has on Staff: _____

Describe the current workload for performing activities that include the design, construction, installation, testing, maintenance, alteration, service, and repair of any elevator or conveyance: _____

_____

_____

_____

Check here if additional documentation is attached: _____

Describe the efforts to date to recruit and hire NYSDOL licensed elevator mechanics:

_____

_____

_____

Check here if additional documentation is attached: _____

Note: To be eligible for Temporary Elevator Mechanics License, an individual must apply for that license through NYSDOL's MPWR portal and meet the requirements. Requirements include providing documentation demonstrating apprenticeship enrollment in an elevator apprenticeship program and a minimum of four thousand hours of elevator industry experience.

List any individuals who would seek a Temporary Elevator Mechanics License to work under this shortage:

First Name Last Name DMV ID Number (optional)

_____

_____

_____

_____

_____

_____

Check here if additional documentation is attached: _____

Acknowledgement and Declaration

By selecting the box below, I understand and agree that I am providing information to the Department of Labor. I certify that all the information I am providing is true, correct and complete and that I am authorized to provide the information.

☐ I have read and understand the e-signature disclaimer above.

Signature: _____