



THE CITY OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL PROTECTION

FORM 314C+AR365
Rev 04/2014

Bureau of Environmental Compliance
59-17 Junction Boulevard, 9th Floor
Flushing, New York 11373
Records Control (718)595-3855

Emily Lloyd
Commissioner

Michael Gilsean
Assistant Commissioner
Environmental Compliance

APPLICATION FOR CERTIFICATE OF OPERATION / TRIENNIAL RENEWAL - INDUSTRIAL PROCESS

Date:	Fee Paid:	Installation No.:	Expiration Date:

REQUEST TYPE:	<input type="checkbox"/> INSPECTION / ORIGINAL C.O.*	<input type="checkbox"/> INSPECTION / RENEWAL C.O.	<input type="checkbox"/> RENEWAL REGISTRATION
IS THIS A RE-INSPECTION? <input type="checkbox"/> YES <input type="checkbox"/> NO			

INFORMATION OF PREMISE

STREET ADDRESS:	NAME OF PREMISE [IF ANY]:	FLOOR:	ROOM No.:
BOROUGH:	ZIP CODE:	BIN:	BLOCK:
			LOT:

INFORMATION OF APPLICANT

NAME OF APPLICANT / AGENT:	BUSINESS NAME:		
STREET ADDRESS:	CITY / BOROUGH:	STATE:	ZIP CODE:
E-MAIL ADDRESS:	TELEPHONE:	CELL PHONE:	FAX:

INFORMATION OF OWNER OF THE EQUIPMENT

NAME OF OWNER:	TELEPHONE	CELL PHONE:
STREET ADDRESS:	CITY / BOROUGH:	STATE: ZIP CODE:
E-MAIL ADDRESS:	FAX:	

I request a **Certificate of Operation / Renewal of Certificate of Operation / Renewal Registration** for the equipment which is the subject of the above referenced installation number and which has been inspected by the owner / owner's agent and is ready for inspection by the New York City, Department of Environmental Protection, Bureau of Environmental Compliance.

I am aware that if there is exposed friable asbestos in a damaged or deteriorated condition in the room / area where the equipment is located the inspection will not be completed and a Notice of Disapproval will be issued.

"I hereby affirm under penalty of perjury that the information provided on this form is true to the best of my knowledge and belief and that the equipment will be operated in accordance with the requirements of the Air Pollution Control Code, Chapter 1 of Title 24, New York City Administrative Code, and appropriate requirements of other agencies. I recognize that false statements are punishable as a misdemeanor pursuant to Sec 24-190 of the Air Pollution Control Code and Sec 210.45 of the Penal Law."

Installer Professional Engineer Owner / Agent

NAME _____ BUSINESS NAME _____ LICENSE NUMBER [IF APPLICABLE] _____

SIGNATURE _____ DATE _____

*ALL APPLICATIONS FOR ORIGINAL CERTIFICATE OF OPERATION MUST BE SIGNED BY LICENSED PROFESSIONAL.