APPLICATION Z-59

EMERGENCY ACTION PLAN DIRECTOR

FIRE DEPARTMENT – CITY OF NEW YORK
BUREAU OF FIRE PREVENTION, PUBLIC CERTIFICATION AND EDUCATION UNIT
9 METROTECH CENTER, BROOKLYN, NY 11201-3857

Section A - Applicant Information

Please print or type the information in the boxes below.

SOCIAL SECURITY NUMBER

DATE OF BIRTH

DAYTIME TELEPHONE NUMBER

LAST NAME

FIRST NAME

MI

MAILING ADDRESS

APT. NO.

IF YOU LIVE IN NYC, CHECK BOROUGH: ◯ Manhattan ◯ Bronx ◯ Brooklyn ◯ Queens ◯ Staten Island

CITY OR TOWN

STATE

ZIP CODE

Section A – FSD Certification

Attach a copy of the document that shows you have been certified as a Fire Safety Director for Hi-Rise/Office Buildings F-58 or F-25

Section B – EAPD School Diploma.

Attach the original EAP School Diploma.

Section C - EAP Listing

Attach affidavit from building owner attesting to applicant's listing as EAPD

Section D - Declaration

On this _____ day of _____, in the year _____, I have hereunto affixed my signature and I certify that, subject to penalty pursuant to the New York State Penal Law, New York City Administrative Code §15-220.1, Fire Department rule 3RCNY §6-02, and any other applicable law, rule or regulation, that the information provided above is true and accurate.

Signature of Applicant: _____ Date:

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FOR FDNY USE ONLY

Date Received: _____/_____/200__ Q_____

NQ_____