Department of Development
Bureau of Buildings
515 North Avenue
New Rochelle, N.Y. 10801

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Paul Vacca, C.E.O.
Deputy Commissioner / Building Official

AFFIDAVIT OF CONSTRUCTON SUPERVISION FOR ELEVATORS, ESCALATORS AND SIMILAR EQUIPMENT

BUILDING PERMIT NUMBER_____**DATE SUBMITTED**_____

ADDRESS_____**BLOCK:**_____**LOT:**_____

TYPE OF INSTALLATION_____
(Hydraulic Elev.) (Traction Elev.) (Escalator) (Other)

STATE OF NEW YORK)

COUNTY OF_____**) S.S.**

_____**being duly sworn deposes and says:**
(Print Name)

that he resides at_____**and that he will supervise**

the construction of the_____**under the subject permit.**
(Type of Equipment)

Deponent further states that he is an employee of _____**with offices at** _____
(Company Name) **(Company Address)**

duly authorized by the owner of the subject premises to submit this affidavit and that he has at least ten years experience as a full-time Elevator Inspector, installer, contractor, mechanic or repairman and that he is familiar with the applicable provisions of the New York State Fire Prevention and Building Code of the City of New Rochelle.

Deponent further states that, in the event that he discontinues supervision of the subject construction at any time prior to its completion, for any reason, he shall immediately notify the Bureau of Buildings, City of New Rochelle, New York.

Sworn to before me this_____
Day of_____20____

_____
(Notary Public)

_____
(Signature of Deponent)

_____
(Telephone Number)

Affidavit reviewed and approved under the provisions of Section 107.3 (111-13.F and 111-6.3.) New Rochelle Building Code.