



Special Inspector License Application

Elevator Occupational Licensing

www.oklahoma.gov/labor

OKLAHOMA DEPARTMENT OF LABOR

409 NE 28th St

Oklahoma City, OK 73105

405-521-6100/888-269-5353

APPLICATION TYPE

New or Re-apply

APPLICATION FEE

\$100.00

Please make your Check, Money Order or Cashier's Check payable to ODOL

*If license is expired less than 365 days, you must use the Certificate Inspector License Renewal Application

REQUIRED DOCUMENTATION FOR NEW APPLICANTS

All new applicants must demonstrate proper qualifications by submitting documentation of the following:

- ASME QEI-1 certification or equivalent standard as determined by the Commissioner
- Two years of experience as a licensed elevator witness inspector
- Verification of Insurance as specified in **59 O.S. § 3023 (G)**

U.S. CITIZENS:

- Affidavit of Lawful Presence, signed
- A valid, unexpired Driver's License **OR** State Issued Photo Identification Card **OR** Military ID **AND**
- Birth Certificate **OR** Social Security Card **OR** A valid, unexpired passport **OR** A W-2 form/1099 form

NON-U.S. CITIZENS:

- Affidavit of Lawful Presence, signed
- A valid, unexpired Driver's License **OR** State Issued Photo Identification Card **OR** Military ID **AND**
- Birth Certificate **OR** Social Security Card **OR** A valid, unexpired Passport **OR** A W-2 form/1099 form
- Verification of Immigration Status

All applicants can appear **IN PERSON** at the Oklahoma Department of Labor, ODOL approved facility, or provide a current passport photo on initial application and every 10 years thereafter

Name:	Social Security #:	Date of Birth:
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Mailing Address:	City:	State:	Zip Code:
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Cell Phone #: ()	E-mail Address:
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Employed By:

MILITARY STATUS:

*Within the past six (6) months, have you been honorably discharged from the Armed Forces of the United States, coming off Active Duty as a member of the National Guard or Reserves, or transferred from another state to Oklahoma? Yes No

If yes, provide date of discharge/transfer: _____

*Are you a spouse of an active duty member of the Armed Forces of the United States? Yes No

I certify all statements are true to the best of my knowledge and that all work shall be done in compliance with the State of Oklahoma elevator law, rules, and regulations adopted by the Oklahoma Department of Labor; I also certify I am actively employed by the company I'm representing and that in the event of my leaving said firm, agree to immediately notify the Oklahoma Department of Labor.



Applicant Signature / APPLICATION CANNOT BE PROCESSED WITHOUT A SIGNATURE AND FEE

DATE

FOR OFFICE USE ONLY

The Department of Labor will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.	Date:	Lic #:	Receipt #:
	Initials:	Payment Type:	Amount:



The Elevator Certificate Inspector License allows the licensee to witness periodic tests as well as conduct inspections for the issuance of a Certificate of Operation.

ATTESTATION FOR ELEVATOR CERTIFICATE INSPECTOR LICENSE:

The enclosed application, which is specific to the undersigned's application for elevator license, reflects the following requirements outlined in the Elevator Safety Act, Oklahoma Administrative Code (OAC) 380:70-5-6.

(Please initial to acknowledge your agreement)

The undersigned, as applicant for the enclosed elevator license, shall not engage in the sale of any service, article, or device relating to elevators or conveyances of their _____ appurtenances covered by this Act.

The undersigned, as applicant for the enclosed elevator Inspector license, shall not hold _____ a current Elevator Contractor's License or an Elevator Mechanic's License.

In accordance with 12 OS §. 426, I state under penalty of perjury under the laws of Oklahoma that the forgoing is true and correct.

Print Name: _____ Name of Company: _____

Signature: _____ Date: _____

This signed statement under penalty of perjury shall constitute a legally binding assertion that the contents of the statement to which it refers are true.

If you have any questions, please call the Licensing division at (888) 269-5353 or (405) 521-6100.

Sincerely,

*Licensing Division
Oklahoma Department of Labor*



AFFIDAVIT OF LAWFUL PRESENCE BY PERSON MAKING APPLICATION FOR A LICENSE, PERMIT, OR CERTIFICATE

I, the undersigned applicant, being of lawful age, state that one of the following statements is true and correct (check which of the following statements apply):

- I am a United States citizen.
- I am a qualified alien under the Federal Immigration and Nationality Act and lawfully present in the United States.

Alien or Admission Number: _____

I state under penalty of perjury under the laws of Oklahoma that the forgoing is true and correct and that I have read and understand this form and executed it in my own hand.

Date: _____ Signature: _____

City & State: _____ Print Name: _____

If applying to renew a license, permit, or certificate, please write the number: _____

INSTRUCTIONS FOR USE OF THE AFFIDAVIT OF LAWFUL PRESENCE BY PERSON MAKING APPLICATION FOR A LICENSE, PERMIT, OR CERTIFICATE

The person signing this form must read these instructions carefully

1. If the person executing this form is receiving services and not making an application for a license, permit, or certificate, this form should **not** be used, but rather, either the form titled "***Affidavit of Lawful Presence by Parent or Guardian Receiving Services***", or the form titled "***Affidavit of Lawful Presence by Person Receiving Services***" should be used.
2. If the person executing this form is a citizen of the United States, then that person should check the box to the left of the statement "***I am a United States citizen***". If the person executing this form is not a citizen of the United States, but is a qualified alien under the Federal Immigration and Nationality Act, and is lawfully present in the United States, then that person should check the box to the left of the statement "***I am a qualified alien under the Federal Immigration and Nationality Act and lawfully present in the United States***".
3. In the space after the word "***Date***", the person executing this form should write today's date. In the space after the words "***City & State***", the person executing this form should indicate the city and state where they are actually located when they sign this form.
4. Within the context of the execution of this form, the term "penalty of perjury" means the willful assertion of the fact of either United States citizenship or lawful presence in the United States as a qualified alien, and made upon one's oath or affirmation and knowing such assertion to be false. Making such a willful assertion on this form knowing it to be false is a crime in Oklahoma, and may be punishable by a term or incarceration of no more than five (5) years in prison. Additionally, one who procures another to commit perjury is guilty of the crime of subornation of perjury and may be punished in the same manner as he would be if personally guilty of the perjury so procured.