



## **SUFFOLK COUNTY DEPARTMENT OF LABOR, LICENSING & CONSUMER AFFAIRS**

P.O. Box 6100, Hauppauge, NY 11788-0099 (631) 853-4600 FAX (631) 853-4825

### **APPLICATION INSTRUCTIONS FOR SIGN HANGERS LICENSE**

*Please Note: This application requires documented proof of five year's employment in this industry.*

1. Application must be filled out completely on both sides.
2. Applicant must complete and sign the attached Affirmation. In particular, please note that you must choose between (A) or (B) in the first paragraph.
3. Applicant must attach the following to the application:

A) If incorporated, please provide a copy of your corporate minutes indicating your position in the corporation, and a copy of the New York State filing receipt.

**OR**

B) If you are a d/b/a, please provide a d/b/a Certificate obtained from the Suffolk County Clerk's Office in Riverhead. Please call (631) 852-2000 for information.

**AND**

4. Applicant must submit a non-refundable application fee of two hundred dollar (\$200.00) by either money order or check made payable to **Suffolk County Department of Consumer Affairs**.
5. You must attach a passport photo to the application where indicated. We will take a photo of you for your ID card, but you must provide the photo for your application.
6. Applicant must submit a Certificate of Liability and Property Damage Insurance in the minimum amount of five hundred thousand dollars (\$500,000.00) containing a fifteen (15) day cancellation statement. The Certificate must name "Suffolk County Department of Labor, Licensing & Consumer Affairs as the Certificate holder.
7. A Certificate of Worker's Compensation as required by New York State Law.
8. Once your application has been approved, you will be asked to submit a check or money order for four hundred (\$400.00) dollars for the required two-year license. Approximately thirty (30) days before your license expires, you will be sent a renewal notice to extend your license another two years.
9. Copy of N.Y.S. driver's license or DMV non-driver photo I.D.

# SIGN HANGERS LICENSE APPLICATION

*Please Type or Print – Answer All Questions*

Applicant's Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security #: \_\_\_\_\_

**Privacy Act Statement**

Pursuant to the Federal Privacy Act of 1974, as amended, the disclosure of Social Security numbers for applicants is mandatory and is required by 42 USCS § 666(a)(13), New York State General Obligation Law § 3-503, and Suffolk County Law § 563.5 and/or SCC 239, and/or sec 275-3A, and/or SCC 313-18A, and/or SCC 361-3A and/or SCC 391, and/or SCC 460-5, and/or SCC 483. Such numbers disclosed on the application are requested for the administration of Title IV-D of the Social Security Act (Child Support Enforcement Act) and related provisions of State law. Such numbers will be used by the Department of Labor, Licensing, & Consumer Affairs to facilitate application processing and to maintain a uniform system of identifying applicants.

Home Street Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Business Name(s): \_\_\_\_\_

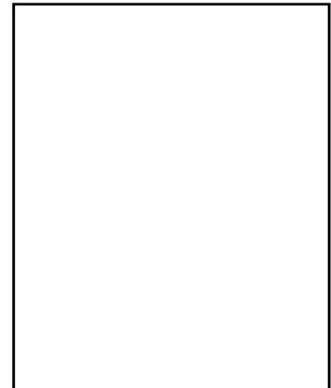
Business Street Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**IMPORTANT:** Note that your business telephone number listed here will be the key number by which people will be able to search the Consumer Affairs website to determine whether or not you have a valid license. You must list this number correctly on business cards, contracts, advertising etc.



Passport Photo

**Type Business**

Corporation  Partnership  Sole Proprietorship  Other

1. Federal Tax ID No. \_\_\_\_\_

2. Worker's Compensation No. \_\_\_\_\_

3. NYS Sales Tax Registration No. \_\_\_\_\_

Do you subcontract your work?  No  Yes If yes, name and address of subcontractor.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Personal Reference (not related by blood or marriage)**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Each separate business requires a separate license.

List all additional business names and addresses in which you are principal officer: including location of all branches and separate offices. If "None", write none.

<u>Business</u>	<u>Address</u>	<u>Principal type of work</u>
_____	_____	_____
_____	_____	_____

List all principal officers or partners associated with your present business. Please include their present position in the firm. If "None", write none.

<u>Name</u>	<u>Address</u>	<u>Position in Firm</u>
_____	_____	_____
_____	_____	_____

List all previous business or subsidiaries in which you were a principal officer, all other associated officers and present status of the business (i.e. defunct, bankrupt, sold, etc.) If "None", write none.

<u>Business Name</u>	<u>Address</u>	<u>Associated Officers</u>	<u>Present Status</u>
_____	_____	_____	_____
_____	_____	_____	_____

List name(s) of current employees, officers or partners who are now, or were, principal officers of any other companies engaged in the this field during the past five (5) years. Include business name(s), address and dates of affiliation. Use additional sheets if necessary. If "None", write none.

\_\_\_\_\_

\_\_\_\_\_

List employers during the past five year period.

Name _____	Phone _____
Business Address _____	
Name _____	Phone _____
Business Address _____	

Are you presently or have you ever been licensed in Suffolk County or any other municipality? \_\_\_ Yes \_\_\_ No

If Yes, Where: \_\_\_\_\_ License # \_\_\_\_\_ Type License \_\_\_\_\_  
Expiration Date \_\_\_\_\_ If more than one, list \_\_\_\_\_

**Remit application fee of \$200.00 (non-refundable) made payable to:  
Suffolk County Consumer Affairs**

Sec. 175.35-Offering a false instrument for filing in the first degree:

A person is guilty of offering a false instrument for filing in the first degree when, knowing that a written instrument contains a false statement or false information, and with intent to defraud the state or any political subdivision thereof, he offers or presents it to a public office or public servant with the knowledge or belief that it will be filed with, registered or recorded in or otherwise become a part of the records of such public office or public servant.

Offering a false instrument for filing in the first degree is a class E felony.

L. 1965, c. 1030

Signed \_\_\_\_\_ Date \_\_\_\_\_



STATE OF NEW YORK )  
COUNTY OF SUFFOLK ) ss:

AFFIRMATION

(Name) \_\_\_\_\_

(Company Name) \_\_\_\_\_

**1. You must check either (A) or (B)**

(A) I affirm that there have never been any judgments filed against the above named individual applicant or firm.

(B) I affirm that all judgments against me have been discharged, are being appealed, or being paid according to agreed scheduled payments with creditors and that there are no unsatisfied or unnegotiated judgments against either the above named individual applicant or firm.

2. I hereby acknowledge that I have been advised, and am fully aware, that Suffolk County Code Chapter 563 requires that any individual who negotiates or offers to negotiate a contract for the above named licensee with a consumer, or solicits or otherwise endeavors to procure a contract from a consumer on behalf of the above named licensee, whether or not such individual is an employee of the above named licensee, will first obtain an identification card from the Suffolk County Department of Labor, Licensing, & Consumer Affairs.

3. I certify that all contractors/sub-contractors will have in their possession a valid Suffolk County Occupational License as required by Suffolk County Code.

4. Briefly describe work to be performed:

**Note: This must match the "Description Of Operations" on your certificate of insurance**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Individual's Name and Title \_\_\_\_\_

Company Name \_\_\_\_\_

**AFFIRMATION** (To be completed by Applicant): I AFFIRM UNDER PENAL TIES OF THE PENAL LAW, THAT I PREPARED THIS APPLICATION AND THAT THE STATEMENTS CONTAINED THEREIN ARE, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND CORRECT AND THAT I HAVE NOT KNOWINGLY AND WILLFULLY MADE A FALSE STATEMENT OR GIVEN INFORMATION WHICH I KNOW TO BE FALSE IN CONNECTION THEREWITH.

**COMPLIANCE AFFIRMATION:** I understand the issuance of my license requires compliance with all laws applicable to my business. I understand that Title 8 USC I 324a makes the hiring of unauthorized aliens unlawful and imposes record keeping responsibilities if I am an employer. I am also obligated to pay taxes for employees I may have. I affirm I am now and have been in compliance with Title 8 USC1324a and I have paid/will pay all required payroll tax payments for any employee including Social Security, Medicare and State and Federal unemployment taxes. I AFFIRM THAT THE STATEMENTS ON THIS LICENSE APPLICATION ARE TRUE.

Signed \_\_\_\_\_ Date \_\_\_\_\_

## APPLICANT BACKGROUND INFORMATION

Your Name \_\_\_\_\_

YOU MUST ANSWER ALL OF THE FOLLOWING QUESTIONS AND SIGN THIS FORM. IF YOU ANSWER “YES” TO ANY OF THE QUESTIONS, PLEASE PROVIDE A DETAILED EXPLANATION ON A SEPARATE SHEET.

- (1) Have you ever been convicted of a crime or offense of any kind (other than traffic or parking violations) or entered a plea of guilty or nolo contendere? Y\_\_\_\_ or N\_\_\_\_
- (2) Are any criminal charges currently pending against you? Y\_\_\_\_ or N\_\_\_\_
- (3) Are you now, or were you ever on parole or probation? If YES, you MUST provide a letter of good standing from your parole/probation officer. Y\_\_\_\_ or N\_\_\_\_
- (4) Have you ever been the subject of any investigation by a federal, state or local agency (other than a routine background investigation for employment purposes)? Y\_\_\_\_ or N\_\_\_\_
- (5) Have you ever been cited for contempt of any court or legislative, civil or criminal investigative body or grand jury? Y\_\_\_\_ or N\_\_\_\_
- (6) Have you, or any business in which you are or were an owner, officer, director or partner, been the subject of any criminal or administrative investigation? Y\_\_\_\_ or N\_\_\_\_
- (7) Are there any liens or judgments against you or any business in which you are or were an owner, officer, director or partner? Y\_\_\_\_ or N\_\_\_\_
- (8) Were you, or any business in which you are or were an owner, officer, director or partner, ever involved in a bankruptcy proceeding? If yes, where and when \_\_\_\_\_ Y\_\_\_\_ or N\_\_\_\_
- (9) Are there any tax liens currently assessed or pending against you or any business in which you are or were an owner, officer, director or partner, or any real property in which you have a beneficial or legal interest? Y\_\_\_\_ or N\_\_\_\_
- (10) How long have you resided at your current address? \_\_\_\_\_ Yrs. \_\_\_ Mths.
- (11) Have you resided outside the State of New York for more than 180 days in the last calendar year? Y\_\_\_\_ or N\_\_\_\_  
If so, please indicate below your out of state residence address:  
\_\_\_\_\_
- (12) Have you been conducting business under the present business name, and if so, where? \_\_\_\_\_ Y\_\_\_\_ or N\_\_\_\_
- (13) Do you own or have any interest in real property that has been cited for health, safety or environmental violations by federal, state or local authorities? Y\_\_\_\_ or N\_\_\_\_

(14) Are you in arrears on any child support and/or maintenance obligations? Y \_\_\_ or N \_\_\_

(15) Bank Accounts for this business:

Bank Name & Location: \_\_\_\_\_

Bank Account #: \_\_\_\_\_

Date Opened: \_\_\_\_\_

NOTE: A LICENSE WILL NOT BE ISSUED WITHOUT A VALID BANK ACCOUNT.

(16) Name of CPA, if any: \_\_\_\_\_

Name of corporate attorney, if any: \_\_\_\_\_

(17) Have you or any immediate family member ever been involved in a business which had a license issued by this Office? Yes \_\_\_ No \_\_\_ License # \_\_\_\_\_ Date Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_

Was this license suspended or revoked? Yes \_\_\_ No \_\_\_ Date Suspended \_\_\_\_\_ Date Revoked \_\_\_\_\_

(18) Have you or any immediate family member ever been involved in a business which had a license issued by:

New York City? Yes \_\_\_ No \_\_\_ License # \_\_\_\_\_ Date Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_

Was this license suspended or revoked? Yes \_\_\_ No \_\_\_ Date Suspended \_\_\_\_\_ Date Revoked \_\_\_\_\_

Nassau County? Yes \_\_\_ No \_\_\_ License # \_\_\_\_\_ Date Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_

Was this license suspended or revoked? Yes \_\_\_ No \_\_\_ Date Suspended \_\_\_\_\_ Date Revoked \_\_\_\_\_

Any other local municipalities?

Yes \_\_\_ No \_\_\_ License # \_\_\_\_\_ Date Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_

Was this license suspended or revoked? Yes \_\_\_ No \_\_\_ Date Suspended \_\_\_\_\_ Date Revoked \_\_\_\_\_

**NOTE: ALL ANSWERS AND RESPONSES WILL BE CHECKED AND VERIFIED VIA COMPUTER SEARCH AND OTHER INVESTIGATIVE METHODS.**

AFFIRMATION (to be completed by Applicant): I AFFIRM UNDER PENALTIES OF THE PENAL LAW, THAT I PREPARED THIS APPLICATION AND THAT THE STATEMENTS CONTAINED THEREIN ARE, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND CORRECT AND THAT I HAVE NOT KNOWINGLY AND WILLFULLY MADE A FALSE STATEMENT OR GIVEN INFORMATION WHICH I KNOW TO BE FALSE IN CONNECTION THEREWITH.

Signed \_\_\_\_\_ Date \_\_\_\_\_

## Suffolk County Law 563 Licensed Occupations

### Article X

#### Sign Hangers

##### Definitions.

As used in this article, the following terms shall have the meanings indicated:

##### Display Sign

A sign, sign screen, billboard or advertising device of any kind that exceeds 75 square feet in area or 25 pounds in weight.

##### Sign Hanging

Installing, building, erecting, hanging, suspending, hoisting, lowering, attaching, or removing any kind of display sign on, upon or from any structure or any exterior walls or roof of any structure.

##### Structure

Any stationary combination of materials built or erected, including, but not limited to, a building, bridge, framework, billboard, railroad trestle, awning or other object that has been put together from different parts.

#### § 563-120

License required.

It is unlawful for any person to engage in any business as a sign hanging contractor without obtaining a license therefor from the Office in accordance with and subject to the provisions of this article and Article I of this chapter.

#### § 563-121

Licensing board.

A. The County Executive, with the approval of the legislative body, shall appoint a five-member Sign Hanging Licensing Board to serve for a three-year term. Said Board shall determine the fitness of applicants for a sign hanging license and shall investigate and report on all proposed suspensions or revocations of licenses as hereinafter provided. Said Board shall be composed of individuals having a personal knowledge of and interest in sign hanging, such as representatives of labor, management, trade or professional associations, and appropriate representatives of government. A Licensing Director shall be appointed by the Director and shall serve as secretary of the Board. The Director shall serve as a nonvoting ex-officio member of such Board.

B. For the initial appointment only, three members of the Board shall be appointed for three-year terms, one member for a two-year term, and one member for a one-year term. All appointments thereafter shall be for a three-year term.

C. Compensation. Each member of the Board shall be compensated at the rate of \$100 for each official meeting of said Board attended, but not more than \$1,500 in any calendar year.

D. Powers and duties. The Licensing Board shall have the following powers and duties:

- (1) To hold meetings at regular times and places for the efficient discharge of the responsibilities and duties of the Board.
- (2) To make rules for the conduct of its meetings and to keep a minute book of its proceedings, including a record of its examinations and other official actions.
- (3) To examine the qualifications and fitness of applicants applying for licenses under this article.
- (4) To develop oral, written and/or practical examinations in order to judge the qualifications of an applicant.
- (5) To authorize the Director to issue a sign hanging license.
- (6) To conduct meetings and, after a hearing at which all interested parties are afforded a sufficient opportunity to be heard, submit recommendations to the Director relating to the suspension or revocation of a sign hanging license for cause.
- (7) To keep records of licenses issued, suspended or revoked and to make such records available for public inspection.
- (8) To prepare a manual of rules and regulations for the conduct of examinations and to furnish copies thereof to persons desiring same.
- (9) To formulate and recommend to the Director a code of rules for adoption or amendment governing sign hanging, including the materials, workmanship and manner of executing such work. Before making such recommendation, the Board shall confer and meet with the representatives of the sign hanging industry and hold a hearing on the proposed rules. Reasonable prior notice of the time and place of such hearing shall be given by publication in the official newspapers of the County.
- (10) To formulate and recommend to the Director, for adoption or amendment, rules and standards for the issuance, suspension and revocation of licenses, including the conditions for the issuance of same, the type of examination required, the terms and fees and the conditions upon the circumstances under which the same may be revoked or suspended.

#### § 563-122

Fees.

A. An application fee of \$200 shall accompany each application for a sign hanging license.

B. The fee for a sign hanging license or renewal thereof shall be \$200 per annum.

#### § 563-123

Temporary license pending issuance of permanent license.

A. The Office shall issue a temporary license to any applicant for a sign hanging license if the Office has not, within 30 days after receipt of the application for such license, approved or disapproved the application.

B. The temporary license shall be for a period of 90 days. If, within such ninety-day period, the Office shall have failed to approve or disapprove the application, the Office shall then issue a regular license to the applicant. If the application is approved during the term of the temporary license, the Office shall issue a regular license to the applicant.

C. The fee for a temporary license shall be \$50 per annum. The fee for a regular license issued to replace a temporary license shall be \$150 for the first full year.

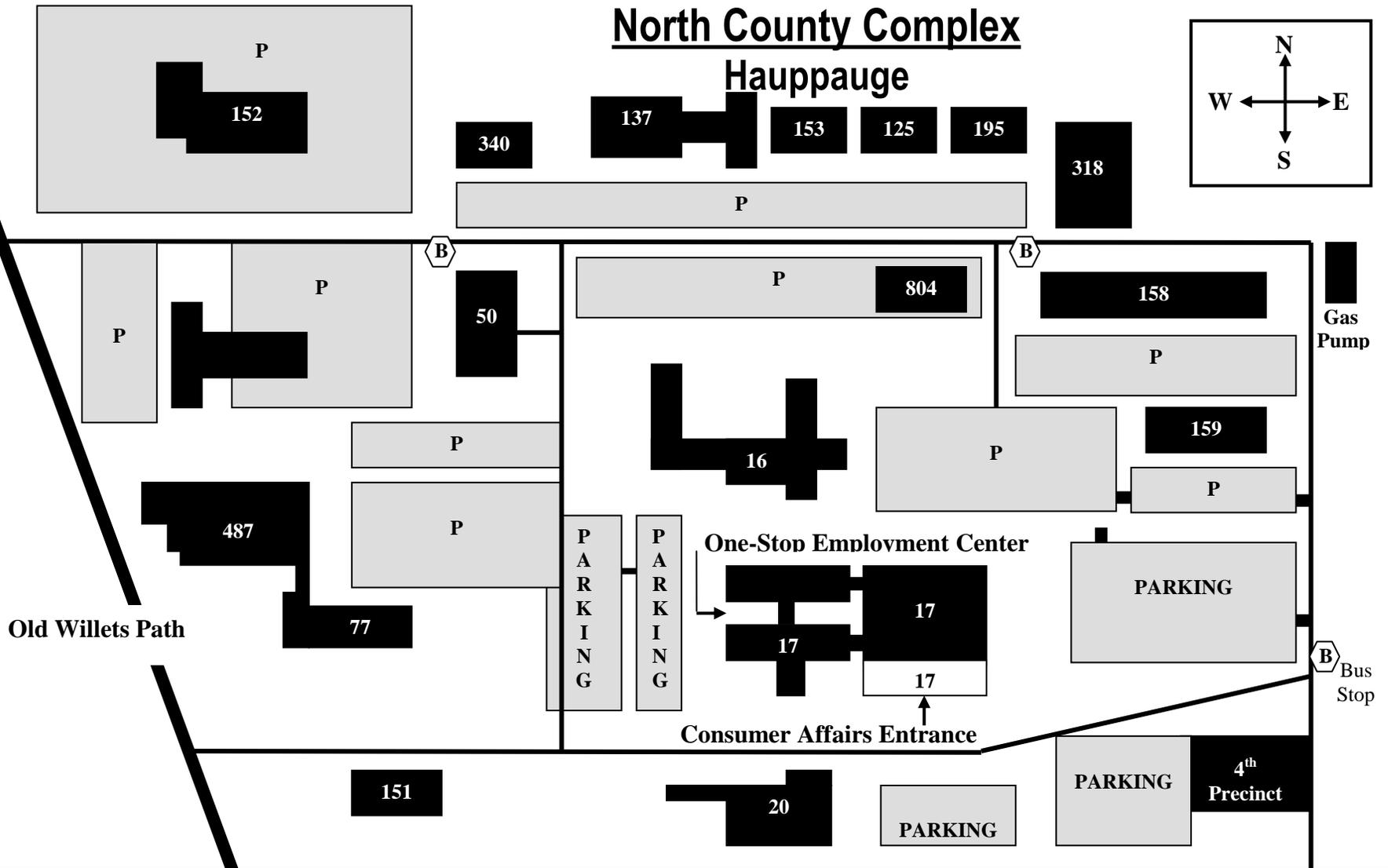
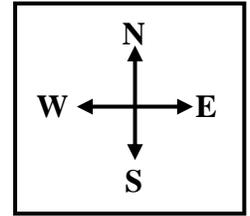
D. A regular license issued pursuant to the provisions of Subsection B shall expire on the last day of the 24th month following the issuance of the temporary license.

§ 563-124

Exempted operations.

No license shall be required of an employee who performs labor or services for a licensed sign hanging contractor for wages or salary.

# North County Complex Hauppauge



Northern State Pkwy Light

Light

Veterans Memorial Highway

Light

16- EAC Community Mediation  
**17- Suffolk County One-Stop**  
**17- Consumer Affairs**  
 20- County Legislature  
 50- Data Processing  
 77- District Attorney

125- Relocation & Grounds  
 137- Custodial Warehouse  
 151- Telecommunications Unit  
 152- Fleet Garage  
 153- DCA Testing Facility

158- Personnel /Civil Service/ Handicap Services & 4<sup>th</sup> District Court  
 159- Department of Health Services/ Alcohol & Substance Abuse/ Bureau of Environmental Protection

195- Relocation & Grounds  
 318- Department of Public Works  
 487- Forensic Science Building  
 804- TASC Building