



Applicant's Name: \_\_\_\_\_

Lab Room # \_\_\_\_\_

Department \_\_\_\_\_

Convent Ave at 138th Street  
New York, N. Y. 10031

Tel: 212.650. \_\_\_\_\_

Fax: 212.650 \_\_\_\_\_

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

\_\_\_\_\_, 2020

To Whom It May Concern  
NYC Fire Department  
Office of Public Certificate  
9 Metrotech Center East  
Brooklyn, NY 11201-3857

Re: Statement of Applicant for Certificate of Fitness  
for The Supervision of Chemical Laboratories

I, \_\_\_\_\_ have a reasonable understanding of and have received training in 3RCNY&10-01, I am currently employed at the City College, 160 Convent Ave, New York, NY 10031, \_\_\_\_\_ Building and have been worked for \_\_\_\_\_ years in a Chemical Laboratory post-baccalaureate experience in the operation of chemical laboratories may apply for alternative issuance which is stated and signed by the employer/supervisor on a company official letter head.

I acknowledge that a certificate of fitness for the Supervision of a Chemical Laboratory (Type C-14) is being issued to me by the New York City Fire Department based on my academic credentials. I have knowledge of the department regulations governing work with Chemical Laboratories and have attended training provided by the Environmental Health and Safety Office at City College.

I hereby do solemnly affirm that the information provided by me in this letter is true and accurate to the best of my knowledge.

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_