



Building Standards and Codes

New York State
Department of State
Division of Building Standards and Codes
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BUILDING SAFETY INSPECTOR CERTIFICATION APPLICATION FORM

This form is required for anyone intending to perform fire safety and property maintenance inspections on existing buildings in New York State pursuant to 19NYCRR Part 1208 and Part 1203. *If you are currently working toward completing the Basic Training courses for certification as a Code Enforcement Official please do not fill this form out. By doing so may delay your certification as a Code Enforcement Official.*

First Name: _____ Middle Initial: _____ Last Name: _____

DBSC Student Training ID Number: _____

Municipality/State Agency/Organization (if applicable): _____

Mailing Address: _____

Indicate if this address is: Home _____ Business _____

Business Phone: _____ Cell Phone: _____ Home Phone: _____

E-mail address: _____

You will receive a Building Safety Inspector (BSI) certification at the address listed above after your completion of Courses 9A, 9B and 9C or (9G) has been verified by the Division of Building Standards and Codes (DBSC).

To perform fire safety and/or property maintenance inspections of existing buildings as a Building Safety Inspector under 19 NYCRR Part 1208, your certification must be active.

Six hours of code enforcement in-service training is required between January 1 and December 31 each year to maintain active BSI certification, starting the calendar year after which initial certification was received. Building Safety Inspectors are also required to complete any advanced in-service training required by DBSC. Failure to obtain required in-service or advanced in-service training will result in an inactive BSI certification status.

An inactive certification status of less than two consecutive years may be reclassified to active by completing the required in-service training for the current calendar year.

An inactive certification status for three or more consecutive years may be reclassified to active by successfully completing Courses 9A, 9B and 9C.

I certify that I have read and understand the above requirements and that the issuance of a certification by DBSC does not indicate that I am considered in active status as a Building Safety Inspector.

Signature of Applicant: _____ Date: _____

Please return the completed form to the address listed above.

DBSC Use Only	
Date Received: _____	Verified by: _____
Approval Date: _____	Denial Date: _____
Certification Date: _____	Action Required: _____
Certification #: _____	