



COMMONWEALTH OF MASSACHUSETTS
OFFICE OF PUBLIC SAFETY AND INSPECTIONS
APPLICATION FOR ACTIVE/INACTIVE
STATUS REQUEST OF THE HOISTING LICENSE

Please send application to:

Office of Public Safety and Inspections, 1000 Washington Street, Suite 710, Boston, MA 02118, Attn: Licensing Unit

Any operator of Hoisting Machinery who is unable to obtain the required continuing education necessary to renew their License may request that the License be placed in inactive status for up to 1 continuing education cycle and shall make the request in writing. Operators holding a License on an inactive status shall not be authorized to operate Hoisting Machinery for the time period that the License is inactive. A determination by the Department that a licensee may return to active status shall be made following the Department's receipt of a written request by the Licensee, the required renewal fee, a Certificate of Completion, and submission of required documentation pursuant to 520 CMR 6.02(6).

Full Name:

(first name)

(middle Initial)

(last name)

Mailing Address:

(P.O. Box or Street)

(City)

(State)

(Zip Code)

Phone #:

Email Address:

Hoisting License: HE -

Restrictions: _____ Expiration Date: _____ / _____ / _____

I am requesting for the following status change to my Massachusetts Hoisting Machinery License:

Place License in an Inactive status for up to 1 continuing education cycle Remove Inactive status from License

NOTE: Must submit the following to place license in an Inactive status:

- *Completed renewal application*
- *\$60 non-refundable processing fee*
- *2" x 2" photo (Unless Authorization for Release of MA RMV Photo Information Signed-Off)*
- *Copy of valid driver's license*
- *Copy of valid DOT medical certificate*

Please provide an explanation below for requesting an Active/Inactive status change to your Hoisting Machinery License:
(Please attach additional pages if necessary)

CERTIFICATION:

I hereby certify under the penalty of law that this document and all attachments to the best of my knowledge are true and accurate.

Signature of Applicant

Printed Name

Date