



New York State Division of Criminal Justice Services
SECURITY GUARD PROGRAM – TRAINING SITE APPROVAL REQUEST

This form must be submitted to the Division of Criminal Justice Services (DCJS) to receive approval for each school training site. The form provides information on the facilities to determine if they are satisfactory for the proper conduct of mandated security guard training. The facilities must be properly equipped and meet local fire and building standards. At least sixteen square feet must be allotted per student. The Division will identify the number of students allowable for each individual training session based on the square footage of the classroom and equipment etc., located in the space. The number of students allowable in any one training session cannot exceed 35. Training sites used for non firearms security guard training must be handicap accessible. A Certificate of Occupancy; fire authority approval; a floor plan; and digital photographs of the exterior of the premises, building handicap accessibility elements, and interior rooms identified on the floor plan must be submitted with this form. The Division reserves the right to inspect the training site prior to approval.

Certificate of Occupancy

The training site must be approved for use as a school by the municipality in which the site is located. A copy of a valid Certificate of Occupancy must be included with this form. The training site address must be the same as the address listed on the Certificate of Occupancy.

A Certificate of Occupancy (CO) is issued by local municipalities to verify that local building codes have been met and the building is suitable for occupancy. It further states the purpose for which the quarters are to be used (i.e., commercial, residential, school, etc.)

To obtain a copy of a CO in NYC, visit the Department of Buildings' Customer Service Counter in your borough office or log on to the Building Information System at <http://nyc.gov/bis>. If a building was constructed before 1938 and there has been no change in use or additions to the property, it may not have a CO. To obtain proof of the legal use of a building that does not have a CO, you must obtain a "Letter of No Objection" from the Department of Buildings' borough office where the property is located.

*A Certificate of Occupancy is required for all structures; however, certain enterprises may be waived from the requirement that the CO specifically approves the site for school use.

**Submission of a Certificate of Occupancy may be waived for governmental agencies, municipalities and public or private educational institutions in NY or any other jurisdiction.

***If a municipality does not issue Certificates of Occupancy for existing structures, you must submit a letter from the municipality to that effect.

Zoning Compliance Letter

Submit proof that the site to be used to conduct training is legal and is permitted at that location.

*A Zoning Compliance Letter is required for all training sites; however, certain enterprises may be waived from the requirement that the Zoning Compliance Letter specifically approve the site for school use.

**Submission of a Zoning Compliance Letter may be waived for governmental agencies or municipalities and public or private secondary or collegiate-level educational institutions in NY or any other jurisdiction.

Fire Approval

The premises in which mandated security guard training courses will be conducted must be approved for occupancy by the fire authority of the municipality or county in which the site is located. The approval must have been granted during the past three (3) years. The address listed on the fire authority approval must be the same as the address listed in Number 4 (Training Site) of the application. In some circumstances the applicant may not yet have rented the premises. If this is the case, the approval may be missing from the application packet. However, the premises must be rented upon notice to you by DCJS that your approval is nearing completion and Fire Authority Approval must be provided for final approval of the application.

Handicap Accessibility

Training sites used for non firearms security guard training must be handicap accessible. Title III of the American with Disabilities Act (effective January 26, 1992), requires private businesses to be accessible to persons with disabilities. Provide photographs (digital or hard copy) of the handicap accessibility elements of the building.

Floor Plans

Floor plans must be drawn to scale of at least ¼" equaling 1". DCJS reserves the right to request a different scale if necessary. The scale must be indicated on the plans. Each room must be assigned a number and the proposed use of the room and square footage must be listed below (e.g., classroom, bathroom, office, etc.). The floor plans must show:

1. Dimensions of each room or unit of space;
2. Entrances and exits, stairways, corridors, fire escapes;
3. Windows;
4. Student work stations (desks, chairs), furniture, blackboard, white board, audio visual equipment, etc.; and
5. Utilities – heating and air conditioning, and lighting.

*Submission of a floor plan may be waived for governmental agencies or municipalities and public or private secondary or collegiate-level educational institutions in NY or any other jurisdiction.

Photographs

For the training site, digital photographs of the exterior of the premises, building handicap accessibility elements and interior rooms identified on the floor plan must be submitted. Digital photographs must be on a CD/DVD disk or USB flash drive and submitted with the floor plan. For the firearms facility, provide digital photographs of the indoor range (if applicable), the exterior and interior of the classroom(s) and bathroom(s). A floor plan is not required for the firearms facility classroom.



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School Name:	School Identification No:
School Address:	Room/Suite:
City, State, Zip Code:	County:
Telephone Number (area code + number):	
School Owner Name(s):	
School Director Name:	

Training Site Address (if different than above):	
City, State, Zip Code:	County:
Training Site Floor Level (e.g., Street level, 2 nd floor, 3 rd floor, etc.):	Is the site handicap accessible: Yes <input type="checkbox"/> No <input type="checkbox"/>

Audio Visual Equipment:

Firearms Facility Name of Range:	
Range Street Address:	County:
City, State, Zip Code:	Range Telephone Number (area code + number):
Range Contact:	Contact Telephone Number (area code + number):
Number of Lanes:	Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/>
Entity that Approved Range:	Facility meets applicable lead safety standards. <input type="checkbox"/>
Identify safety features of the range (bullet resistant glass, etc.):	

Room Specific Information		
Room Number:	Proposed use of room:	Floor Space in Square Feet:
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_____ Printed Name of Requester (School Owner or School Director only)	_____ Title (School Owner or School Director)
_____ Signature of Requestor	_____ Date

Submit Completed Form to: NYS Division of Criminal Justice Services, Office of Public Safety, Security Guard Program, 4 Tower Place, Albany, NY 12203
 Direct questions to the Security Guard Program at (518) 457-4135.

DCJS Use Only	
Floor plan submitted: Yes <input type="checkbox"/> No <input type="checkbox"/> Date: _____	Digital photographs submitted: Yes <input type="checkbox"/> No <input type="checkbox"/> Date: _____
Certificate of Occupancy submitted: Yes <input type="checkbox"/> No <input type="checkbox"/> Date: _____	Zoning Letter Submitted: Yes <input type="checkbox"/> No <input type="checkbox"/> Date: _____
Fire Approval submitted: Yes <input type="checkbox"/> No <input type="checkbox"/> Date: _____	
Training site handicap accessible (required for sites to be used for non firearms security guard training): Yes <input type="checkbox"/> No <input type="checkbox"/> Date: _____	
Number of students allowable per training session based on square footage and equipment etc. located in the space: _____	
Training site approved: Yes <input type="checkbox"/> No <input type="checkbox"/> Date: _____	
Approved by (printed name): _____	Signature: _____ Date: _____
Comments:	