



CEDAR Application

PRINT NAME

NY CEO/BSI ID # (NY or CE)

Personal Information

Street Address

Town/Village/City

State Zip Code

County

Email Address

Work phone no.

Home phone no.

Mobile phone no.

DBSC Use Only

	YES	NO
CEO / BSI Certification		
ICS 700.a		
ICS 100.b		
License Number verified		
Approve		
Disapprove		

Reason for disapproval:

Date IAMRESPONDING profile created

Employer Information

Employer

Street Address

Town/Village/City

State Zip Code

Check all that apply

CEO BSI Architect Engineer

Complete the NYS Education Department License number only if you selected either Architect or Engineer

NYS Education Department License Number

Date ICS 700.a completed

Date ICS 100.b completed

Date transcript request submitted to FEMA

ICS INFORMATION: Please email a copy of your certificates to: CEDAR@dos.ny.gov

Please add skills, training or knowledge that you feel would benefit the program