



**NASSAU COUNTY**  
**DEPARTMENT OF CONSUMER AFFAIRS**  
240 Old Country Road, Mineola, NY 11501  
Phone: (516) 571-2600  
consumeraffairs@nassaucountyny.gov  
www.nassaucountyny.gov

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## GENERAL INSTRUCTIONS FOR NCTLC FOR-HIRE DRIVER AUTHORIZATION LICENSE

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THE FILING OF AN APPLICATION DOES NOT CONSTITUTE PERMISSION TO OPERATE.  
A LICENSE MUST BE IN THE POSSESSION OF THE LICENSEE.

1. **APPLICATION FORM** must be completed and signed.
2. **AFFIDAVIT FORM** must be completed, signed, and notarized.
3. **DRIVER'S LICENSE:** Applicants must provide a copy of their Driver's License and must be at least 19 years old; a NYSDMV licensed driver for at least 6 months; possess a valid New York State Class A, B, CDL-C (with passenger endorsement for DOT Van, Ambulette/Paratransit and Bus driver) or class E driver license; and does not have more than seven (7) DMV points within an 18-month period calculated from the date of the application. AMBULETTE, PARATRANSIT & DOT VAN drivers must be 19-A certified.
4. **SECOND PROOF:** Applicants must submit a second proof of address. Either a current utility bill (electric or home telephone), Mortgage statement, or a copy of a current lease. Cell Phone bills are NOT acceptable.
5. **DEFENSIVE DRIVING:** Applicants must have an original certificate of completion from an approved NYSDMV 6-hour defensive driving course that does not expire during the term of the NCTLC license.
6. **SOCIAL SECURITY CARD:** Applicants must submit a copy of their Social Security Card. Name on the Social Security card must match NYSDMV driver license, the application and all submitted documents. If Social Security card states "VALID FOR WORK ONLY WITH DHS AUTHORIZATION", applicants must submit an original employment authorization document.
7. **OUTSTANDING CHILD SUPPORT/FINES/VIOLATIONS:** Applicants must NOT have outstanding child support, fines, or debt obligations to any governmental agency.
8. **BACKGROUND CHECK:** Applicants are required to undergo a fingerprint background check at a NYS Division of Criminal Justice approved location within five (5) business days of submitting application. Applicants must provide a copy of receipt for the fingerprint background check with application.
9. **DRUG TEST:** Applicants must go to a NCTLC approved lab for drug testing within five (5) business days of submitting application. Applicants must provide a copy of receipt for drug screening with application. (The fee for the drug test must be paid directly to the lab at the time of testing. Although the license is a 2-year license, you are required to undergo a DRUG TEST YEARLY.)
10. **PENALTY FOR FALSIFICATION:** The issuance of a license is subject to verification of the information provided in the application. Falsification of any statement made herein is an offense punishable by a fine, and/or revocation, suspension or denial of license and criminal prosecution by the Office of the District Attorney.

11. **FEES:** Application fee for two (2) year license is \$100.00. ALL PAYMENTS MUST BE MADE BY CERTIFIED CHECK OR MONEY ORDER, CHECK OR CREDIT CARD PAYABLE TO: “THE COUNTY OF NASSAU”

**NOTICE:** The NC Department of Consumer Affairs TLC For-Hire Vehicle Registration and the For-Hire Vehicle Driver’s Authorization **DOES NOT** entitle you to operate point-to-point within the borders of any town, city or village located in Nassau County which currently regulates for-hire vehicles and/or drivers. If you wish to operate point-to-point within any of these municipalities, you must contact the administrative office of such municipality. Failure to comply with any laws, rules, regulations and licensing requirements of any town, city or village can result in enforcement by the municipality and NC Department of Consumer Affairs.

**ALL APPLICATION FEES & MATERIALS ARE NON- REFUNDABLE, NON-RETURNABLE.**

**FAILURE TO COMPLETE ALL REQUIREMENTS WITHIN 90 DAYS OF SUBMITTING YOUR APPLICATION WILL RESULT IN THE AUTOMATIC DENIAL OF YOUR APPLICATION.**



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*FOR OFFICE USE ONLY*

**APPLICATION FEE: \$100.00**  
 DATE PAID: \_\_\_\_\_ RECEIPT #: \_\_\_\_\_  
 CHECK/CC/MO: \_\_\_\_\_  
 ISSUED BY: \_\_\_\_\_

**TAXI & LIMOUSINE COMMISSION**  
**FOR-HIRE DRIVER AUTHORIZATION LICENSE APPLICATION**

**TYPE OR PRINT CLEARLY IN BLACK OR BLUE INK.**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Place of Birth (City/State/Country): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: (If different than home address) \_\_\_\_\_  
 \_\_\_\_\_

DMV ID No.: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Sex: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

**ALL QUESTIONS MUST BE ANSWERED ACCURATELY AND TO THE BEST OF THE APPLICANT'S KNOWLEDGE UNDER PENALTY OF LAW.**

**IF YOU ANSWER "YES" TO ANY OF THE FOLLOWING, YOU MUST PROVIDE CERTIFIED COPIES OF COURT DISPOSITIONS AND WRITTEN EXPLANATION FOR ALL CHARGES. A COPY OF THE COURT CASE(S) MAY BE REQUIRED.**

HAVE YOU EVER BEEN CONVICTED OF A CRIME? (Misdemeanor/Felony)  Yes  No

HAVE YOU EVER BEEN CONVICTED OF A DWI OR ANY OTHER ABILITY IMPAIRED OR UNDER THE INFLUENCE OF ALCOHOL OR DRUGS WHILE DRIVING VIOLATION?  Yes  No

HAVE YOU EVER HAD ANY TAXI, FOR-HIRE OR DMV DRIVER LICENSE ISSUED TO YOU DENIED, SUSPENDED OR REVOKED?  Yes  No

DO YOU CURRENTLY HAVE ANY CRIMINAL CHARGES PENDING AGAINST YOU?  Yes  No

DO YOU HAVE ANY CHILD SUPPORT ORDER(S)? IF YES, YOU MUST SUBMIT A COPY OF THE ORDER AND PROOF THAT ALL SCHEDULED PAYMENTS ARE BEING MADE.  Yes  No

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DO YOU HAVE ANY JUDGMENTS, LIENS OR TAX WARRANTS  Yes  No

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DO YOU CURRENTLY HAVE OR HAVE YOU EVER HAD A TAXI OR FOR-HIRE DRIVER LICENSE ISSUED BY ANY OTHER MUNICIPALITY? (IF "YES", LIST INFO BELOW)  Yes  No

\_\_\_\_\_  
MUNICIPALITY                      LICENSE NUMBER                      EXPIRATION DATE

\_\_\_\_\_  
MUNICIPALITY                      LICENSE NUMBER                      EXPIRATION DATE

DO YOU CURRENTLY OWE ANY NASSAU COUNTY AGENCY MONEY? IF YES, ALL FUNDS MUST BE PAID TO BE LICENSED  Yes  No

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In consideration of being granted the license hereby applied for, it is agreed that the applicant will comply with the rules and regulations of the Department of Consumer Affairs that are now in force or that may in the future be promulgated.

**PENALTY FOR FALSIFICATION:** Falsification of any statement made herein is an offense punishable by a fine, and/or revocation or denial of license and criminal prosecution by the Office of the District Attorney.

**FAILURE TO COMPLETE:** Failure to complete all requirements with 90 days of submitting your application will result in automatic denial of your application.

APPLICATION FEE: \$100.00 (2 YEAR)

PAYMENTS CAN BE MADE BY CHECK, CERTIFIED CHECK,  
MONEY ORDER, OR CREDIT CARD  
PAYABLE TO "COUNTY OF NASSAU"

ALL APPLICATION FEES ARE NON-REFUNDABLE AND NON-RETURNABLE

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

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



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**AFFIDAVIT OF APPLICANT  
 FOR-HIRE DRIVER AUTHORIZATION LICENSE**

I, \_\_\_\_\_ having been duly sworn, depose and state that:  
 (PRINT FULL NAME)

- a) I have examined this application and to the best of my knowledge, all information and answers herein are true, correct, and complete.
- b) I understand that, in accordance with FOI law, all license applications are public records and subject to public disclosure, which include this application and all other documents and information filed herewith.
- c) I understand and agree that the fees paid with this application are non- refundable and that the payment of these fees does not guarantee the issuance of an authorization.
- d) I understand that I am responsible to take a drug test EVERY YEAR to maintain my authorization privileges and that failure to do so as mandated by the Nassau County Taxi and Limousine will result in those privileges being suspended or revoked.
- e) You are required to notify this office in writing within ten (10 days) of any change in address.
- f) I understand that all application requirements must be satisfied within 90 days of submitting this application or my application will automatically be denied.
- g) In consideration of being granted the authorization hereby applied for, it is agreed that the applicant will comply with the rules and regulations of Taxi & Limousine Commission or the Department of Consumer Affairs that are now in force or that may in the future be promulgated. The Commissioner may at any time request any additional information that he or she deems fit and appropriate in order to properly assess the eligibility of any applicant for NCTLC for-hire license or vehicle registration.
- h) I understand that, pursuant to §210.45 of the NYS Penal Law, it is a crime punishable as a Class “A” Misdemeanor to knowingly make a false statement herein.

**PENALTY FOR FALSIFICATION:** Falsification of any statement made herein or submission of falsified documentation accompanying this application is an offense punishable by a fine, and/or suspension, revocation or denial of registration and criminal prosecution by the Office of the District Attorney.

**MUST BE NOTARIZED**

Sworn to before me  
 this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_  
 (Applicant Printed Name)

\_\_\_\_\_  
 Notary’s Signature

\_\_\_\_\_  
 (Applicant Signature)