

NASSAU COUNTY DEPARTMENT OF CONSUMER AFFAIRS 240 Old Country Road, Mineola, NY 11501

Phone: (516) 571-2600

consumer affairs@nassaucountyny.gov

www.nassaucountyny.gov

FOR OFFI	CE USE ONLY
Duplicate L	icense \$60 Fee
Date Paid: _	

DUPLICATE LICENSE REQUEST FORM

To request a duplicate license to be printed and mailed, the following is required:

- Fill out this Duplicate License Request Form. This form must be signed by a principal/owner of the company.
- Current Certificate of Business Liability Insurance with the description of work you are licensed to perform in the Description of Operations Box. If you are hiring sub-contractors, you must have "sub-contracting" listed on your certificate. Certificates that expire within 30 days are not acceptable.
- Current Certificate of Workman's Compensation Insurance on a 105.2 or U26 form; or if no employees, a current signed CE-200 form, (Waiver). Certificates that expire within 30 days are not acceptable.
- Business Check, Certified Bank Check, or Money Order for \$60 made payable to the "County of Nassau."
- Once approved, your license will be printed and mailed to your business mailing address.

Name of Principal/Owner Making Request:	Title/Position:
Name of Licensed Business:	
Address of Business:	
Mailing Address (If different than business address. PO Box or UPS Store Only):	
Reason Duplicate License is Being Requested:	
Signature of Dringing 1/Over an	
Signature of Principal/Owner:	