

#### NASSAU COUNTY DEPARTMENT OF CONSUMER AFFAIRS

240 Old Country Road, Mineola, NY 11501

Phone: (516) 571-2600

consumeraffairs@nassaucoutnyny.gov

www.nassaucountyny.gov

REGISTRATION RENEWAL FEES: \$250.00 PER VEHICLE

\$5.00 PER EXEMPT VEHICLE REPLACEMENT FEES:

\$25.00 PER VEHICLE FOR VEHICLE, PLATE

AND BASE CHANGES

# GENERAL INSTRUCTIONS FOR NCTLC FOR-HIRE VEHICLE REGISTRATION RENEWAL & REPLACEMENT REGISTRATION

# THE FILING OF AN APPLICATION DOES <u>NOT</u> GRANT OPERATING AUTHORITY AND MUST BE FILED IN PERSON. THE REGISTRATION MUST BE IN THE POSSESSION OF THE LICENSEE TO OPERATE.

- 1. Applicant must submit any town, city, village or county license for each vehicle if applying for an exempt registration (if applicable).
- 2. Applicants must submit a valid NYSDMV vehicle registration, title or bill of sale with vehicle VIN.
- 3. Applicants must submit a current FH-1 Insurance card for each vehicle.
- 4. Applicants must provide a Certificate of Liability Insurance (Accord Form #25-S), with Nassau County Consumer Affairs TLC, 240 Old Country Road, Mineola, NY 11501, as the certificate holder, and have 10 or more days of Notice of Cancelation.
- 5. Vehicle Inspection receipt (as applicable) for the vehicle's NYS Safety Inspection.
- 6. Applicants must not have outstanding child support, fines, or debt obligations to any governmental agency.
- 7. Applicants must submit a completed renewal/replacement application with the appropriate fee required. (See chart above and/or on the renewal/replacement application form.)

YOU MAY SUBMIT ONE PAYMENT FOR MULTIPLE VEHICLES

ALL PAYMENTS <u>MUST</u> BE MADE BY CERTIFIED CHECK OR MONEY ORDER, CHECK OR CREDIT CARD PAYABLE TO: "THE COUNTY OF NASSAU"

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

**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.

**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.

PLEASE HAVE ALL REQUIRED DOCUMENTS ORGANIZED BY VEHICLE TO BE REGISTERED.

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



### FOR OFFICE USE ONLY

REGISTRATION	AMOUNT: \$	

REGISTRATION AMOU	J1 <b>11.</b> φ	
DATE PAID:	RECEIPT #:	
CHECK/CC/MO:		
ISSUED BY:		

# TAXI & LIMOUSINE COMMISSION FOR-HIRE VEHICLE RENEWAL & REPLACEMENT REGISTRATION APPLICATION

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

THE OR PRINT CLEARLY IN BLACK OR BLUE INK.						
□ RENEWAL:	□ \$250.00 FEE	PER VEHICL	E □ \$5.00 F	EE PER VEHI	CLE FOR EXEMPT	
□ REPLACEMEN	T: \$25.00 FEE	PER VEHICLI	E (please indicate	reason(s) below	<i>i</i> )	
□ PLATE CHANGE	□ VEHICLE	CHANGE	LOST/DAMAGE/	DESTROYED	□ BASE CHANGE	
(If switching a vehicle	to a new corporat	ion; you must com	nplete an entire nev	w application)		
				Date of Birt	h:	
(as listed on DMV Registration DBA:				EIN/SS #: _		
□ CORPORATION		RTNERSHIP		PROPRIETORS		
Legal Address:				Phone #:		
					#:	
Email Address:					#:	
Mailing Address: (If	different than leg	gal address)				
CURRENT VEHIC	LE INFORMA	TION: (This is t	for Vehicle Chan	ge and/or Plate (	Changes)	
TYPE OF VEHICLE	E: □ TAXI	□ LIMOUSIN	E □ COMM	IUTER VAN	□ PARATRANSIT	
NCTLC Registration	No.:		Exp	oiration Date:		
				Plat	e:	
Color:	_ Seating Capa	acity:	VIN #:			
IS THE VEHICLE LICE						
					,	
MUNICIPALITY		LICENSE NUMBE	CR	EXPIRATION	DATE	

## TYPE OF VEHICLE: □ TAXI □ LIMOUSINE □ COMMUTER VAN □ PARATRANSIT Year: \_\_\_\_\_ Make: \_\_\_ Model: Plate: Color: \_\_\_\_\_ Seating Capacity: \_\_\_\_\_ VIN #: \_\_\_\_\_ IS THE VEHICLE LICENSE ISSUED BY ANY OTHER MUNICIPALITY? (IF "YES", LIST INFO BELOW) MUNICIPALITY LICENSE NUMBER **EXPIRATION DATE** Is this vehicle leased? $\square$ Yes $\square$ No If "Yes"; complete the following information about the lessor(s) and attach copy of lease agreement: Telephone #: Address: \_\_\_\_\_ Lease #: Has this vehicle been stretched? □ Yes □ No If "Yes"; Is this vehicle CMC or QVM certified? $\Box$ Yes $\Box$ No Is this vehicle handicapped accessible? □ Yes □ No **CURRENT BASE INFORMATION:** Name: \_\_\_\_\_ Base/Company Owner: Phone #: \_\_\_\_ Address: Base #:\_\_\_\_ **NEW BASE INFORMATION:** (If applicable for base change) Name: \_\_\_\_\_\_ Base/Company Owner: \_\_\_\_\_ Address: Phone #: \_\_\_\_\_ Base #:\_\_\_\_ ALL QUESTIONS MUST BE ANSWERED ACCURATELY AND TO THE BEST OF THE APPLICANT'S KNOWLEDGE REGARDING THE FOLLOWING QUESTIONS WITH REGARDS TO ALL OWNERS, PARTNERS, OFFICERS AND MANAGERS; UNDER PENALTY OF LAW. HAVE ANY OWNERS, PARTNERS, OFFICERS OR MANAGERS EVER BEEN □ Yes CONVICTED OF A CRIME? (Misdemeanor/Felony) HAVE ANY OWNERS, PARTNERS, OFFICERS OR MANAGERS EVER BEEN CONVICTED □ Yes □ No OF A DWI OR ANY OTHER ABILITY IMPAIRED OR UNDER THE INFLUENCE OF ALCOHOL OR DRUGS WHILE DRIVING VIOLATION?

**NEW VEHICLE INFORMATION:** (If applicable for a vehicle change and/or plate change)

HAVE ANY OWNERS, PARTNERS, OFFICERS OR MANAGERS EVER HAD ANY TAXFOR-HIRE OR DMV DRIVER LICENSE ISSUED DENIED, SUSPENDED OR REVOKED		□ Yes		No
DO ANY OWNERS, PARTNERS, OFFICERS OR MANAGERS HAVE CRIMINAL CHAIR CURRENTLY PENDING AGAINST THEM?	RGES [	□ Yes		NO
DO ANY OWNERS, PARTNERS, OFFICERS OR MANAGERS HAVE CHILD SUPPORT ORDER(S)? IF YES, YOU MUST SUBMIT A COPY OF THE ORDER AND PROOF THE ALL SCHEDULED PAYMENTS ARE BEING MADE.		□ Yes		No
DO ANY OWNERS, PARTNERS, OFFICERS OR MANAGERS HAVE ANY JUDGMENT LIENS OR TAX WARRANTS?	ΓS, [	□ Yes		No
DO ANY OWNERS, PARTNERS, OFFICERS OR MANAGERS CURRENTLY OWE ANY NASSAU COUNTY AGENCY MONEY? IF YES, ALL FUNDS MUST BE PAID TO BE		□ Yes		No
IF YOU ANSWERED "YES" TO ANY OF THE PREVIOUS QUESTIONS, YOU MUS COURT DISPOSITIONS AND/OR WRITTEN EXPLANATION FOR ALL CHARGES MAY BE REQUIRED.	S. A COPY O	F THE COURT	ГСА	SE(S)
In consideration of being granted the license hereby applied for, it is agreed the the rules and regulations of the Department of Consumer Affairs that are now be promulgated.		-	•	
<b>FAILURE TO COMPLETE</b> : Failure to complete all requirements with 90 days of sautomatic denial of your application.	submitting you	ur application	will 1	result in
If you knowingly possess a written document or instrument containing a <b>false states</b> document or instrument to a public authority or public office, you can be charge Filing in the First Degree, a <b>Class E Felony</b> . See NY Penal Law Section 175.35		•		
ALL APPLICATION FEES & MATERIALS ARE NON- REFUNDA	BLE, NON-	RETURNAI	BLE	•
APPLICANT NAME: PH	IONE #:		_	
APPLICANT SIGNATURE: DA	ATE:			