



**SUFFOLK COUNTY TAXI & LIMOUSINE COMMISSION (SCTLC)**

P.O. Box 6100, Hauppauge, NY 11788-0099 (631) 853-4458 FAX (631) 853-4825

**FOR-HIRE VEHICLE REGISTRATION**

[ ] New \$300 [ ] Renewal \$250

**VEHICLE INFORMATION**

VIN #	Year & Make	License Plate #	Registration Date	Seating Capacity	NYS Inspection Date

Does this vehicle possess a vehicle Registration, License, or Permit in ANY Suffolk County Municipality (Town, Hamlet, or Village)? \_\_\_No \_\_\_Yes If yes, please identify below.

_____	_____	_____	_____
Town, Village, Hamlet	Date Issued	Permit, License or Registration #	Expiration Date

**AFFILIATED BASE STATION(S)**

Base Station Name \_\_\_\_\_

Base Station Address _____	_____	_____	_____	_____
	Street	City	State	Zip

Mailing Address _____	_____	_____	_____	_____
(if different from above)	Street	City	State	Zip

Telephone Numbers: Office \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address:(required) \_\_\_\_\_

Type of Business: \_\_\_Corporation \_\_\_Partnership \_\_\_Sole Proprietor \_\_\_Other

Federal Tax ID # \_\_\_\_\_ NYS Sales Tax Registration # \_\_\_\_\_

Workers Compensation # \_\_\_\_\_

**List All Additional Operations:**

(ALL locations must be listed. Use an additional sheet if more room is required)

1. _____	_____	_____	_____	_____	_____
	Street	Unit #	City	Town/village	State Zip

2. _____	_____	_____	_____	_____	_____
	Street	Unit #	City	Town/village	State Zip

Type of Use (i.e. vehicle parking/storage facility; satellite dispatch office, etc.) \_\_\_\_\_

**OWNER INFORMATION**

**PLEASE NOTE:** Each individual that holds 10% or more of the shares OR holds the title of President, Vice President, Secretary, Treasurer or Member must completely fill out the following pages and submit fingerprints for a background check. Please make additional copies if necessary.

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Last First Initial

Home Address: _____	_____	_____	_____	_____
	Street	Apt #	City/Town	State Zip

Mailing Address: _____	_____	_____	_____	_____
(if different from above)	Street	Apt #	City/Town	State Zip

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Month Day Year

Home Phone \_\_\_\_\_ Office Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-Mail \_\_\_\_\_



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**ALL ANSWERS AND RESPONSES WILL BE CHECKED AND VERIFIED VIA COMPUTER SEARCH, DCJS CRIMINAL BACKGROUND CHECK AND OTHER INVESTIGATIVE METHODS.**

*A conviction does not necessarily mean you will not get a license. Factors such as the nature of the offense, the amount of time that has passed since the conviction and your age at the time of the conviction will be considered (see Article 23-A of the New York State Corrections Law). However, your license may be denied if you fail to disclose a conviction in response to the above questions.*

(1) Are you now on parole or probation? If YES, you MUST provide a letter of good standing from your parole/probation officer. Y\_\_\_ or N\_\_\_

(2) Are you in arrears on any child support and/or maintenance obligations? Y\_\_\_ or N\_\_\_

(3) Have you or any immediate family member ever been involved in a business that had a For-Hire Vehicle Registration or For-Hire Driver License issued by:

Suffolk County TLC Yes\_\_\_ No\_\_\_

License #\_\_\_\_\_ Date Issued\_\_\_\_\_ Expiration Date\_\_\_\_\_

Was this license suspended or revoked? Yes\_\_\_ No\_\_\_ Date Suspended\_\_\_\_\_ Date Revoked\_\_\_\_\_

New York TLC? Yes\_\_\_ No\_\_\_

License #\_\_\_\_\_ Date Issued\_\_\_\_\_ Expiration Date\_\_\_\_\_

Was this license suspended or revoked? Yes\_\_\_ No\_\_\_ Date Suspended\_\_\_\_\_ Date Revoked\_\_\_\_\_

Nassau County? Yes\_\_\_ No\_\_\_

License #\_\_\_\_\_ Date Issued\_\_\_\_\_ Expiration Date\_\_\_\_\_

Was this license suspended or revoked? Yes\_\_\_ No\_\_\_ Date Suspended\_\_\_\_\_ Date Revoked\_\_\_\_\_

Any other local municipalities?

Name\_\_\_\_\_ License #\_\_\_\_\_ Date Issued\_\_\_\_\_ Expiration Date\_\_\_\_\_

Was this license suspended or revoked? Yes\_\_\_ No\_\_\_ Date Suspended\_\_\_\_\_ Date Revoked\_\_\_\_\_

Print Name

Signature

Date

**Privacy Act Statement:** Pursuant to the Federal Privacy Act of 1974, as amended, the disclosure of Social Security numbers for applicants is mandatory and is required by 42 USCS § 666(a)(13), New York State General Obligation Law § 3-503, and Suffolk County Law § 563.5 and/or SCC 239, and/or sec 275-3A, and/or SCC 313-18A, and/or SCC 361-3A and/or SCC 391, and/or SCC 460-5, and/or SCC 483. Such numbers disclosed on the application are requested for the administration of Title IV-D of the Social Security Act (Child Support Enforcement Act) and related provisions of State law. Such numbers will be used by the Department of Labor, Licensing, & Consumer Affairs to facilitate application processing and to maintain a uniform system of identifying applicants.



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**STATE OF NEW YORK  
COUNTY OF SUFFOLK**

**AFFIDAVIT**

I \_\_\_\_\_, duly sworn depose and say:  
Name

1. You must answer either (A) or (B)

(A) That there have never been any judgments filed against the above named individual applicant or firm.

(B) That all judgments against me have been discharged, are being appealed, or are being paid according to agreed scheduled payments with creditors and that there are no unsatisfied or unnegotiated judgments against either the above named individual applicant or firm.

2. That the above individual or firm is in compliance with section 1324a of Title 8 of the United States Code, with respect to the hiring of employees.

3. That the above named individual or firm is making all required payroll tax payments for the applicant's employees, including Social Security taxes, Medicare taxes, and state and federal unemployment taxes.

4. That I have been advised of Suffolk County Code 571 requiring Registration of For-Hire-Vehicles & Drivers in Suffolk County.

5. That I have read and understand the Suffolk County Taxi & Limousine Rules and Regulations, and understand that violation of these rules may result in the suspension or revocation of the vehicle registration.

6. That each of the For-Hire-Driver in my employ possess a valid For-Hire-Driver License from the Suffolk County Taxi & Limousine Commission as required by 571-10 of the Suffolk County Code.

7. That I shall notify the Suffolk County Taxi & Limousine Commission within 10 days of any new hire that requires a For-Hire-Driver License as proscribed by law.

) **Signed** \_\_\_\_\_  
) ss:

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

\_\_\_\_\_  
**Notary Public Signature**



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**VEHICLE REGISTRATION APPLICATION CHECKLIST**

Applications will not be processed without ALL of the following. Failure to submit any of the following items will result in DENIAL of your application.

- \_\_\_ Completed application Signed and Notarized
- \_\_\_ Fee for each vehicle registered. (Each vehicle requires a separate application)
- \_\_\_ Copy of NYSDMV registration for vehicle being registered (Livery/TLC License Plates Only)
- \_\_\_ Proof of insurance for vehicle being registered (Suffolk County Code 571-7e (7c) (See Below)
- \_\_\_ Copies of two (2) forms of ID from each owner (1 (one) must be government-issued photo I.D.)
- \_\_\_ Fingerprinting & background check for each owner  
(Instructions will be given upon receipt of application)
- \_\_\_ Affidavit from owner stating every driver employed has valid SCTLC Driver Permit
- \_\_\_ Check if Accessible Vehicle

No application will be fully processed until ALL information is verified and the background check is assessed. You will be notified when the application is approved or denied.

***Make checks payable to Suffolk County Consumer Affairs  
All Fees Are Non-Refundable***

**Suffolk County Code 571-7e (7c)**

(7) Vehicle information. In addition to any information as may be required by the Commissioner pursuant to his authority under this chapter, the following must be submitted with the application for a for-hire vehicle registration:

(c) Documentation that the each for-hire vehicle to be registered has, for the purpose of insurance or other financial security, coverage in a specified amount per person, payable for the expenses specified in Paragraphs (1), (2) and (3) of Subsection (a) of § 5102 of the New York State Insurance Law, and coverage in specified amounts of minimum and maximum liability for bodily injury and death, as said terms are defined in Subdivision 1 of § 370 of the New York Vehicle and Traffic Law.