

OFFICE USE ONLY
License Number:

42 Broadway New York, NY 10004

nyc.gov/dcwp

## **ROSTER OF PEDICABS**

Pedicab Business Name:	
Business Address:	
Contact Name:	
Contact's Telephone Number:	
Contact's Email Address:	

## **Instructions**

List below the Pedicab Identifying Number (PID) and DCWP Registration Plate Number of each pedicab that you own. **Note**: Each pedicab you list must have a unique and permanently affixed PID.

After you submit your complete application package, DCWP will contact you to schedule an inspection of your pedicab(s) at a designated location. You must pass the inspection before you can operate the pedicab(s).

## Note:

Pedicab Business applicants can apply for no more than 30 pedicabs.

If you bring more than 10 pedicabs for inspection, please arrive with additional staff from your business to help speed processing.

Pedicab	Pedicab Identifying Number (PID)	DCWP Registration Plate Number
1		
2		
3		
4		
5		
6		
7		

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Pedicab	Pedicab Identifying Number	r (PID)	DCWP Registration Plate Number
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
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21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
Signature of	f Contact Person	Contact's Title	
DCWP Staff	f Initials	Date	
DOWN Stan	madio	Date	