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## PROCESS SERVER INDIVIDUAL RECORDKEEPING CERTIFICATION

Process Server Individual Name:	
Process Server Individual DCA License Number (if applicable):	
Home Address:	

I affirm the following:

1. I have read section 20-406.3 of the New York City Administrative Code and sections 2-233 and 2-233a of Title 6 of the Rules of the City of New York (6 RCNY).
2. I or the Process Serving Agency for whom I serve process exclusively as an employee will keep electronic records of each process I serve or attempt to serve for at least seven (7) years in compliance with 6 RCNY section 2-233a. Records must include information required in section 89-cc of the New York State General Business Law and 6 RCNY section 2-233. I understand that tampering with electronic records is prohibited.
3. I understand that falsification of any statement made herein is an offense punishable by a fine or imprisonment or both.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*