NEW FOR-HIRE VEHICLE LICENSE APPLICATION

Please review the TLC new vehicle license application requirements carefully before submitting your application to determine the requirements needed to license your vehicle with the TLC. Please visit the TLC website for more information at: www.nyc.gov/tlc.

Please Select Application Type:
- [ ] WHEELCHAIR ACCESSIBLE VEHICLE (WAV)
- [ ] LEASE TO OWN AGREEMENT (LTO)

APPLICANT INFORMATION

Name

D/B/A

Mailing Address

City [ ] State [ ] Zip [ ] EIN# [ ] or SS# [ ]

Cell phone # [ ] Other Telephone # [ ]

Email Address

Residence Address (No P.O. Boxes)

City [ ] State [ ] Zip [ ]

Business Type (please check one)
- [ ] Sole Proprietorship
- [ ] Partnership
- [ ] Corporation

VEHICLE INFORMATION

VEHICLE ID#: [ ] SEATING CAPACITY: [ ]

PLATE #: [ ] YEAR: [ ] MAKE: [ ]

ARE THE PLATES LISTED ABOVE CURRENTLY ON THE VEHICLE? YES: [ ] NO: [ ]

IS THIS VEHICLE WHEELCHAIR ACCESSIBLE? YES: [ ] NO: [ ]

HAS THIS VEHICLE BEEN STRETCHED? YES: [ ] NO: [ ]

IF YES, PROVIDE THE NAME OF THE COACH BUILDER:

Note: If vehicle has a NYS DOT operating authority (MC 300), a Visual Inspection is required, no fee needed.
NEW FOR-HIRE VEHICLE LICENSE APPLICATION

BASE AFFILIATION INFORMATION

All vehicles licensed by the Taxi and Limousine Commission must be current and affiliated with a licensed Base in order to operate. These vehicles can only be operated by drivers with valid TLC licenses who are permitted to operate that type of vehicle. You must submit an affirmation form completed by a base representative. See Affirmation Form on page 4.

BASE / AUTHORITY NAME: 

BASE LICENSE # 

FOR-HIRE VEHICLES

1) Does the vehicle have LESS than 500 miles recorded on the odometer? 
   YES ☐ NO ☐

   If you answered NO to question 1, an inspection fee of seventy-five ($75.00) dollars is required. The mileage will be verified on the day of inspection.

2) Is the vehicle higher than seven (7) feet? 
   YES ☐ NO ☐

3) Does this vehicle weigh over 8,500lbs? 
   YES ☐ NO ☐

If you answered YES to ANY of the above questions, you will be scheduled for a Visual Inspection at one of our TLC Inspection facilities. On questions 2 or 3, on the day of your inspection you will be required to show proof of a Passed DMV inspection within the last four (4) months (which you can obtain at any local licensed NYS DMV inspection facility).

BACKGROUND QUESTIONNAIRE

If you answer "YES" to any of the four questions below, you must provide a signed statement (below or on a separate document) giving pertinent documentation such as names, dates, permit numbers, certificate of disposition etc.

HAVE YOU OR ANY OFFICER OF THIS COMPANY EVER: 

A) Had any type of license suspended or revoked? 
   YES ☐ NO ☐

B) Had any NYC TLC permit with your name under any other individual, partners, corporations, officers, principals, and / or stockholders? 
   YES ☐ NO ☐

C) Applied for and/or received any type of Street Hail Livery permit granted by the NYC Taxi & Limousine Commission? 
   YES ☐ NO ☐

______________________________________________________________________________________________

______________________________________________________________________________________________

________________________________________

__________________________________________________________________________________________________
LIST ALL OWNERS, PARTNERS, OFFICERS AND STOCKHOLDERS (Use additional page if necessary)

NOTE: This page does not replace a filing receipt for a Corporation or a member breakdown for an LLC.

<table>
<thead>
<tr>
<th>Business Type (please check one):</th>
<th>Sole Proprietorship</th>
<th>Partnership</th>
<th>Corporation</th>
</tr>
</thead>
</table>

**NAME:**

**MAILING ADDRESS:**

**CITY:**

**STATE:**

**ZIP:**

**TELEPHONE #:** (_______)______________ — ____________

**# OF SHARES:**

**SS #:** ____________ — ______ — ____________

**DRIVER LICENSE #:**

For Corporation or Partnership, please check if you are:

- [ ] President
- [ ] Vice President
- [ ] Secretary
- [ ] Treasurer
- [ ] Shareholder

**NAME:**

**MAILING ADDRESS:**

**CITY:**

**STATE:**

**ZIP:**

**TELEPHONE #:** (_______)______________ — ____________

**# OF SHARES:**

**SS #:** ____________ — ______ — ____________

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For Corporation or Partnership, please check if you are:

- [ ] President
- [ ] Vice President
- [ ] Secretary
- [ ] Treasurer
- [ ] Shareholder

**NAME:**

**MAILING ADDRESS:**

**CITY:**

**STATE:**

**ZIP:**

**TELEPHONE #:** (_______)______________ — ____________

**# OF SHARES:**

**SS #:** ____________ — ______ — ____________

**DRIVER LICENSE #:**

For Corporation or Partnership, please check if you are:

- [ ] President
- [ ] Vice President
- [ ] Secretary
- [ ] Treasurer
- [ ] Shareholder

For Election or Change of Officers use only

At a special meeting, stockholders of ______________ nominated and duly elected by unanimous vote the officers listed above.

<table>
<thead>
<tr>
<th>Company Name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Secretary (Print)</th>
<th>Secretary (Signature)</th>
<th>Date</th>
</tr>
</thead>
</table>

By initialing this box, I am affirming that I am the same person who signed the affirmation statement below, that I have read and reviewed this application and that there is an existing and current vehicle license issued by the TLC and that there have been no changes to the Business Entity structure for that current & existing vehicle license since the last submission to the TLC. Copies of a principals DMV license are therefore not needed for this transaction.

"I hereby affirm, under penalty of law, that I have examined and reviewed the information in the submitted form(s) or application(s), including any supplemental form(s) and/or document(s) and that these document(s) and or statement(s) do not contain any untrue statement(s) nor are they missing any material information and/or fact(s). If the box above has been initialed, then I am also affirming that there have been no changes to the Business Entity structure for the most current & existing vehicle license since the last submission to the TLC. I also acknowledge and understand that any false statement(s) submitted is punishable under the law and may result in a denial of an application or the suspension or revocation of an existing license/permit.

I further affirm and acknowledge that I have read all rules applicable to my license and that I understand that I am are required to follow and comply with these rules. Failure to do so may result in the issuance of a summons that could result in the imposition of points, fines, a suspension or revocation of my license.”

Name: ____________________________

Signature: ________________________

Title: ____________________________

Date: ____________________________

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To process an application, a signed affirmation must be submitted for each required entity.

Signatures must be original and signed by hand. No copied or stamped signatures.

The Base affirmation form is used to confirm that the Base is allowing the vehicle owner to affiliate to their Base.

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| I, ____________________________________________, hereby affirm, under penalty of law, that I am an owner / officer |
| **Base Owner / Partner / Corporate Officer** |
| / partner / principal of ____________________________________________; and |
| **Base Name** |
| I understand that by signing this base affirmation form, I grant permission for the below vehicle identification number to affiliate to this base. |
| vehicle identification number |  |
| **Base Owner** | **Print Name** | **Signature** | **Date** |
| ____________________________________________________________________________________________________________________________________ |

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| I, ____________________________________________, hereby affirm, under penalty of law, that I am an owner / officer |
| **Individual Vehicle Owner / Partner / Corporate Officer** |
| / partner / principal of ____________________________________________; and |
| **Partnership / Corporate Name** |
| I understand that by signing this base affirmation form, I grant permission for the above vehicle identification number to affiliate to above base. |
| **Applicant Name** | **Print Name** | **Signature** | **Date** |
| ____________________________________________________________________________________________________________________________________ |