

WESTCHESTER COUNTY TAXI & LIMOUSINE COMMISSION

Department of Public Safety • 112 East Post Road • White Plains, New York 10601 • (914)995-8400

tlc.westchestergov.com

BASE STATION APPLICATION

OFFICE HOURS: 9AM - 1PM (MONDAY thru FRIDAY)

[] New [] Renewal

OFFICE USE ONLY		OFFICE USE O	NLY		OFFIC	E USE (ONLY	
APPLICANT FEE \$	BP#	Previou	s File #	DEPOSIT #				
Fingerprint \$	Expiration:	Prev. Ex	p.		МО	СНК	СС	
Late Fee \$	REC'D BY:	DATE:						
5 G. II. N			NFORMATION					
Base Station Name		Base	Station Address	Street		Unit #		
City			St	tate		Zip		
Mailing Address (If different from above) Street		 Unit #	City		State	Z	 ip	
Telephone Numbers: Office ()	Cell ()	Fax: <u>(</u> _)_			
E-mail Address:								
List All Other Locations Where This Base Has Any Operations: (ALL locations must be listed. Use an additional sheet if more room is required)								
Street	Unit #	City	Sta	ate	Zip			
Type of use (i.e. vehicle parking/stor	age facility; satellite d	ispatch office, etc)						
List <u>ALL</u> Other Business Nam	es Used	BUSINESS INF						
Type of Business Structure:	[] Corpor	ration [] I	LLC [] Partn	ership [] Sole	Propriet	orship	
Name & Address of Company	·						_	
Name of General Manager:							_	
List	(1) Bank That T	The Base Station	Does Day-To-Day	Business Witl	ı:			
Name:		Account #						
		OWNER INFO	PRMATION					
Name: Last Name	First Name		Tit	tle:				
Home Address:								
Street	Apt #		City/Town			State	Zip	
Date of Birth:/	/ Hon	ne Phone ()	Office Phone	()		

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

Cell Phone (____)____

Social Security/Federal ID Number _

WCTLC Driver Permit #	Name	Home A	tional paper if you need more space. Home Address			
	AFFILIATED VEHIC					
List all vehicles operating from the E WCTLC Vehicle Permit #	ease Station (Based owned and a	ffiliated).Use additional paper i Seating Capacity	License Plate #			
		uies and Regulations pertaining	g to Workers Compensatior			
urther, Applicant states that: (selectApplicant is covered by WorkersApplicant is a member of the BlaApplicant is a member of the Inc	one)	nsation Fund, or Fund, or	g to Workers Compensation			
Applicant is a member of the Inc.	one) ' Compensation Insurance, or ack Car Operators' Injury Comper dependent Livery Drivers Benefit	nsation Fund, or Fund, or				
Applicant is covered by Workers Applicant is a member of the Black Applicant is a member of the Inc. Applicant is exempt from Workers Applicant must	one) ' Compensation Insurance, or ack Car Operators' Injury Compendependent Livery Drivers Benefit ers' Compensation requirements. t provide proof of Workers' Confithe court disposition and/or DI d of a crime?	nsation Fund, or Fund, or npensation Insurance or Exem MV abstract on any criminal or	ption.			

If "yes", you must provide do	te, jurisdiction,	reason and any other pertine	nt information:	[] Yes [] No
In consideration of the granting of the perm				
kind or nature may be made by the County notice, letter, summons, complaint, or legal			·	9 ., ,
conform to all rules and regulations of the \	. ,.			0 , 11
addition, applicant understands that accept			0 /1 1	• •
		d		
	(please	print name)		
knowledge and belief, all the information is rejected and that any fees I paid will not be law, all license applications are public recor agree that the Westchester County Taxi & L the Social Security Administration, and Child the NYS Penal Law, it is a crime punishable application Date:	refunded. If I want ds and may be disc imousine Commiss I Support case state as a Class "A" misde	, I can re-apply with a corrected appli losed, including this application and a ion may verify any documents and inf us if applicable in connection with thi emeanor to knowingly make a false st	cation including the required applicat Il other documents and information f formation I provide, including verifica s application. Applicant further under	tion fees. I also know that under the filed with it; and I understand and ation of my social security number by
Application Date:		Jigned.	Applicant's Signature	
State of New York			Applicant's Signature	
County of)ss:	Sworn to before this	day of	, 2
WCPD220 (Pay 10/2014)			Notary Public Signa	nture

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BASE STATION APPLICATION PROCEDURES

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 form Applications will not be accepted if they are not completely filled out and notarized. WCTLC does not notarize forms.	0% or have l must
All sole proprietors must complete an application for a Base Station License. Each individual in a partnership, corporation or other state registered business entity holding to more ownership must complete a separate application. Renewal Base Stations: Renewal Base Stations: If there has been a change in ownership, those individuals who obtained 10% or more ownership of shares in a partnership or other entity prior to renewal each complete a NEW application. All signatures must be notarized. NOTE: If there is a total ownership change, the base must apply for a NEW base station licental New owners and/or mangers must supply two (2) forms of identification each. One must be a	0% or have l must
Criminal Background Form New Applicants only MUST provide a completed copy of the Criminal Background Form Owner Information New Base Stations: All sole proprietors must complete an application for a Base Station License. Each individual in a partnership, corporation or other state registered business entity holding I more ownership must complete a separate application. Renewal Base Stations: If there has been a change in ownership, those individuals who obtained 10% or more ownership of shares in a partnership or other entity prior to renewal each complete a NEW application. All signatures must be notarized. NOTE: If there is a total ownership change, the base must apply for a NEW base station licent New owners and/or mangers must supply two (2) forms of identification each. One must be a	0% or have l must
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government issued nicture ID (i.e. driver license; necessart). Doth IDs must have the same has	
government issued picture ID (i.e. driver license; passport). Both IDs must have the same hor address listed.	.10
Rates of fare Supply a schedule of the base station's rate of fare. Supply a bond in the amount of \$5,000 to the benefit of Westchester County. The bond must	bo
conditioned upon the permittee complying with the requirement that only affiliated vehicles	<i>J</i> E
permitted by WCTLC will be dispatched. The bond shall assure the payment of all civil pena	ltiec
imposed by WCTLC. The bond must also list all dba/trade names used by the company. Plea	
make certain that the bond is signed by the owner of the company and has the corporate seal.	SC
Failure to include the bond with your application may result in a summons being issued with a	1
minimum \$250 fine.	•
Official All corporations are required by §402 of the Business Corporation Law to file a Certificate of	
Filing Receipt- Incorporation with the New York State Department of State (NYSDS). New applicants that	
Certificate of corporations must supply a photocopy to WCTLC of the "Official Filing Receipt" issued by	
Incorporation NYSDS. This is a one time submission.	
Vehicle & Driver You may use a separate sheet if you need more space. If you do so, please make sure t	hat all
Lists information requested for drivers and vehicles is given. Be advised that the base station ov	
responsible for ensuring that a driver have a commercial driver's license, class A, B or	
equivalent from driver's home state), when driving a vehicle with a seating capacity of 15 o	r more
passengers.	
Reference forms New Base Stations: All owners required to fill out the Owners Information section must also	
submit, on the proper WCTLC forms, three (3) fully completed AND notarized references.	
Fees: Application Money order, or business check, payable to "WCTLC" for \$600.00. Credit card is also accept	able.
There is a small service fee for using a credit card. Personal checks/cash will not be accepte	
Fees: Fingerprints \$90. Personal checks/cash will not be accepted. If there are two or more owners, everyone	
owning 10% or more of stock in the corporation and all members of a partnership/sole proprie	tor
must be fingerprinted. NOTE: Only NEW applicants/new owners, as defined in the Owner	
Information section of these procedures, require fingerprinting. THE CRIMINAL BACKGRO	UND
CHECK FORM MUST BE COMPLETED.	
Late fee Renewals that are late are required to pay an additional fee of \$75.00.	

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