



WESTCHESTER COUNTY TAXI & LIMOUSINE COMMISSION
Department of Public Safety • 112 East Post Road • White Plains, New York 10601 • (914) 995-8400
MONDAY through FRIDAY 9:00 am - 1:00 pm

BASE OPERATOR DRIVER AFFILIATION LETTER

tlc.westchestergov.com

The affiliation of the Vehicle listed below has changed as follows: O Add Driver O Cancel Driver

CHANGE EFFECTIVE ONLY UPON RECEIPT AT WCTLC OFFICE

Driver Name: _____ WCTLC Permit # _____

Address: _____ City: _____ State: _____ Zip Code: _____

Base Station Name: _____ WCTLC Permit # _____

Address: _____ City _____ State _____ Zip Code _____

A completed copy must be kept on file at the Base Station.

THIS FORM MUST BE NOTARIZED WITHIN 30 DAYS OF DATE OF FILING

In consideration of the granting of the permit hereby applied for, the applicant agrees that service of any paper, notice, letter, summons, complaint or legal process of any kind or nature may be made by the County of Westchester or any department thereof, upon the person to whom the permit is issued by leaving a copy of any such paper, notice, letter, summons, complaint, or legal process with any person located at the address designated in his/her application. It is further agreed that the applicant designates any driver of the for-hire vehicle listed in this application to accept said service or process on behalf of the applicant. The applicant also agrees that (s)he will conform to all rules and regulations of the Westchester County Taxi & Limousine Commission governing the type of permit for which this application is submitted. In addition, applicant understands that acceptance of this permit subjects the for-hire vehicle listed herein to welfare and compliance inspections. Applicant further understands that, pursuant to §210.45 of the NYS Penal Law, it is a crime punishable as a Class "A" misdemeanor to knowingly make a false statement herein.

Application Date: _____

Signed: _____

Base Operator Manager / Owner Signature

State of New York)

Sworn to before me this _____ day of _____, 20__.

County of _____)ss:

Notary Public Signature / STAMP _____