

# BASE, PLATE AND VEHICLE TRANSFER AND AFFILIATION APPLICATION FHV, PARATRANSIT & COMMUTER VAN

Please read the steps below & review the TLC Vehicle Application Requirements and Checklist carefully before submitting your application. Please visit our website for more information at www.nyc.gov/tlc.

### HOW TO SUBMIT AN APPLICATION FOR A TRANSFER AND/OR AFFILIATION

STEP 1

Schedule an appointment at: <a href="www.nyc.gov/tlcappointment">www.nyc.gov/tlcappointment</a>. An appointment confirmation with the date and time of your appointment will be sent to the email address you have provided. Keep this email for your records.

#### SUBMIT AN APPLICATION

On the day of your appointment, You will need to bring a complete application package. This includes:

- A printout of your Appointment Confirmation.
- A completed "Base, Plate and Vehicle Transfer and Affiliation Application Form."
- > CLEAR AND LEGIBLE COPIES of all required documents. Incomplete application packages will NOT be accepted.
- All required payments.

#### ALL FEES ARE NON-REFUNDABLE.

STEP 2

You must be on time. If you are late you will be required to request a new appointment through your Base.

The applicant must be the registered owner or direct lease holder of the vehicle. Please provide current registration, lease agreement,

certificate of origin or your title (front and back) as proof.

If you are not the owner and/or officer, you must have a signed Power of Attorney from the owner. A Power of Attorney form can be

downloaded at: www.nyc.gov/vehicleowners.

You must use the same address on your TLC application, Declaration Page, FH-1 <u>and</u> DMV registration. If your address is a Post Office Box you must provide a legal address and a recent utility bill or bank statement or lease from your landlord as proof of your legal address. *Cell phone bills are not accepted as proof of address.* 

### **REGISTRATION / INSPECTION**

**Plate Transfers** (Lost, stolen or mutilated plates)

Once your application has been processed at the counter you will be transferred to the DMV Counter if you need new T&LC plates. As soon as you obtain your TC license plates and registration you will be given a Visual Inspection Referral for Woodside.

STEP 3

Base and Vehicle Transfers and Plate transfers with vanity/out of state plates.

Once your application has been processed Your inspection will be scheduled by the TLC staff.

### Notes:

#### Street Hail Livery - SHL (IF APPLICABLE):

- If the vehicle owner does not want to appear at the TLC in person, they may choose someone to come to the TLC for them by filling out the Street Hail Livery Vehicle Power of Attorney Form which can be downloaded at www.nyc.gov/tlc/shl.
- If the permit applicant/owner does not want to appear at the TLC in person, they may choose someone to come to the TLC for them by filling out the Street Hail Livery Permit Power of Attorney which can be downloaded at <a href="https://www.nyc.gov/tlc/shl">www.nyc.gov/tlc/shl</a>.
- A vehicle found operating without current permits or license will be summonsed and may be seized by Enforcement.
- To operate a vehicle as an SHL it must be attached to an SHL Permit.
- The vehicle MUST be Hacked Up BEFORE going for an inspection.
- Yellow vehicles are not allowed to operate as a For-Hire Vehicle.
- The Vehicle cannot operate For-Hire until it has completed the inspection process.

### PASS INSPECTION! START OPERATING!

STEP 4

Once you have passed your inspection, it will take 24-48 hours to update in OpenData.

Once the update is complete you will be cleared to drive.

CALL HEALTHSTAT AT 311 TTY (212) 504 – 4115 WWW.NYC.GOV/HEALTH



# BASE, PLATE AND VEHICLE TRANSFER AND AFFILIATION APPLICATION REQUIREMENTS AND CHECKLISTFHV, PARATRANSIT AND COMMUTER VAN

Please review the Checklist carefully before submitting your application to determine the requirements needed for your transaction with the TLC.  Please visit our website for more information at: www.nyc.gov/tlc.  You must provide CLEAR copies of all required documents. If you do not provide all requirements on the date you submit your application to the TLC, your application will be denied.		VEHICLE TRANSFER	PLATE TRANSFER	BASE TRANSFER	SHL PERMIT AFFILIATION	
ALL FEES ARE NON REFUNDABLE.		SFEF	Ë	- <del>2</del>	Z	
ALL TYPES		~				
Zero outstanding judgments to the TLC, NYS DMV Traffic Violations Bureau (TVB), Department of Parking Violations, DOF Red Light Bureau (i.e., unpaid tickets) and Commercial Motor Vehicle Tax	OF)	✓	✓	<b>✓</b>	<b>✓</b>	
Current for-hire Insurance Certificate (FH-1). Insurance must be issued in the applicant's name.			1	1	1	1
Current DMV registration, Bill of Sale, Leasing Agreement, Certificate of Origin or Certificate of Title (Fr NOTE: Vehicles licensed out of state must provide DMV registration showing seating capacity.	ront and Bad	ck).	<b>✓</b>	4	<b>✓</b>	1
Government Issued photo I.D. of applicant. State issued driver's license preferred.*(see note below	ow)		✓	<b>√</b>	1	1
Social Security Requirement – You must have a valid Social Security number when you submit you	ur application	on.	<b>✓</b>	✓	1	<b>✓</b>
<b>To verify business entities:</b> Filing Receipt & Corporate Resolute (minutes) electing officers, Busine Partnership Certificate, (whichever is appropriate); and Lease Agreement, (if applicable). <b>(See page 2 of 2 for more information)</b>			<b>√</b>	•	1	1
DMV receipt for plates (FS-6T) or new registration with vanity plates documenting that plates have surrendered or destroyed.			<b>✓</b>			
TRANSFER FEE: Twenty Five (\$25) transfer fee for each Transfer type. VEHICLE TRANSFERS ONLY (\$75) Inspection fee also required, depending on the transaction type. See below – "INSPECTION"		1	<b>✓</b>	1	1	
INSPECTION FEE: Seventy-Five (\$75) required if vehicle has 500 miles or more recorded on the od (replacement) Transfers must pay an inspection fee together with their Transfer application fee of transfer application is submitted at LIC or Staten Island, Inspection fees are REQUIRED before you TLC Inspection facilities for an Inspection.  Note: SHL affiliated vehicles are not required to pay an inspection fee.		1				
STRETCH LIMOUSINE ONLY						
<b>Stretch limousine only:</b> In addition to all of the above requirements, limousine applicants must all of the Coach Builder's letter as proof that the vehicle was stretched by a manufacturer- certified shuilder.		<b>✓</b>				
FOR FHV AND COMMUTER VAN ONLY						
Current Insurance Declaration Page directly from your insurance company showing levels of insurance policy must be current.	rance cover	age.	<b>√</b>	1	<b>√</b>	1
STRETCH LIMOUSINE, COMMUTER VAN AND PARATRANSIT						
Stretch limousine vehicle(s), Commuter Van and Paratransit vehicles must have a N.Y.S. Departre Transportation Inspection form (MC300) showing vehicle has been inspected. The front and back report) of the document is required. The defect report must be provided if vehicle inspection report denial. (The inspection report is valid for one (1) year, and it must be current at time of application operating authority license is not required, a NYS DOT exemption letter is needed.	es a	•	•	1	1	
Stretch limousine vehicle(s), Commuter Van and Paratransit vehicles that are required DOT carrier authority, can only be operated by drivers that have an ACTIVE 19A Status.	to have N	<b>YS</b>	1	1	1	1

<sup>\*</sup>Please note: Copies of these documents are not required if the information previously submitted to the TLC for the most current & existing vehicle license has not changed.

FEES can be paid by Money Orders, Certified Checks, Master Card, Visa, AMEX or Discover. <u>Money Orders</u> and <u>Certified Checks</u> are <u>payable</u> to:

<u>NYC Taxi & Limousine Commission</u>.

## **Document Requirements to Verify Businesses Entities**

# Along with all required items listed on the Vehicle Application Checklist, businesses must also include the following documents for your business type:

### **Partnerships**

If the Applicant is a partnership, it must file with its application a certified copy of the partnership certificate from the clerk of the county where the partnership's principal place of business is located.

## Corporations

If the Applicant is a corporation, it must file with its application: A certified copy of its certificate of incorporation; a list of officers and shareholders; a certified copy of the minutes of the meeting at which the current officers were elected.

## Limited Liability Companies (LLCs)

If the Applicant is a limited liability company, it must file with its application: A copy of its articles of organization; a copy of its operating agreement; a list of the members, with the percentages of the Applicant owned by each. We cannot accept an election of officers form for an LLC as they do not have shares in an LLC only percentages are assigned.

Each of the above are also required to submit the photo identification and social security cards of each of its stock holders or members or managing members, whichever is applicable. They also need to submit the IRS issued CP-575 Notice or 147-C letter for the business.



### **VEHICLE INSURANCE REQUIREMENTS**

### Please visit our website for more information at: www.nyc.gov/tlc.

Please see the chart below for the minimum insurance levels your vehicle must possess based on the type of vehicle you own and the vehicle's seating capacity (as per TLC rule unless otherwise noted).

	Vehicle Type	Seating Capacity	Minimum Insurance Levels				
Livery Vehi	Livery Vehicle	1-8 passengers	\$100,000 per person \$300,000 per occurrence \$200,000 PIP*				
	& Black Car	9-15 passengers	\$1.5 Million per occurrence \$200,000 PIP* **See Note				
F	Black Car	16-20 passengers	\$5 million occurrence \$200,000 PIP* **See Note				
V	V Luxury Limousine	Luxury Limousine	1-8 passengers	\$500,000 per person \$1 million per occurrence \$200,000 PIP* **See Note			
			9-15 passengers	\$1.5 million occurrence \$200,000 PIP* **See Note			
		16-20 passengers	\$5 million occurrence \$200,000 PIP* **See Note				
	Commuter Van	1-12 passengers	\$100,000 per person \$300,000 per occurrence \$50,000 property damage				
	commuter van	13-20 passengers	\$100,000 per person \$500,000 per occurrence \$50,000 property damage				
Paratransit Vehicle  Please refer to the New York State Department of Transportation (N'  Passenger-Insurance Requirements for more information.							

<sup>\*</sup>Personal Injury Protection (PIP)

<sup>\*\*</sup>Note: Only a vehicle owned directly by the Base can use a Base Umbrella Policy to meet any portion of the TLC mandated liability insurance requirements. The Declaration Page of the Base policy presented MUST include a schedule of Vehicle Identification Numbers (VINS) that are covered. The policy must have insurance levels that bring the vehicle up to all agency insurance requirements and the policy must cover any and all accidents incurred by the vehicle. There can be no exclusionary language in the policy that limits liability or coverage for the vehicle. The TLC may request a full copy of the Base policy to confirm coverage and this could delay the processing of your application.



# BASE, PLATE AND VEHICLE TRANSFER AND AFFILIATION APPLICATION FHV, PARATRANSIT & COMMUTER VAN

Please review the Checklist carefully before submitting your application to determine the requirements needed for your transaction with the TLC.

The documents needed for each transaction may be different depending on the transaction type – so review carefully.

Please visit our website for more information at: www.nyc.gov/tlc.

TYPE OF VEHICL	E:						TLC License number:			
<b>⊙</b> FOI	R-HIRE VEHICLE		PARATRANSIT	O	COMMUTE	R VAN				
Street Hail Livery \ Vehicle Classificati		Wheelchair Acce	ssible Vehicle	Non Wheelchair	Accessible Vehi	cle				
Please Note: A Wheelchair Accessible SHL Permit MUST affiliate a Wheelchair Accessible Vehicle.  TLC H Record number:										
TRANSACTION T	YPE:	Transfer Plates	<b>O</b>	Transfer vehic	le to another b	pase				
		Transfer Vehicle	e 🔘	Affiliate vehic	le to SHL Permi	it				
APPLICANT INFORMATION										
Name AFFORDABLE LEASING MANAGEMENT INC.										
D/B/A										
Mailing Address	2150 JER	OME AVI	E							
city BRO	VX	State	NEW YORK Zip	10453	EIN 💽 or	SS#				
Cell phone #	917 4	40 3	3563	Other Telep	hone #					
Email Address (Required)  COTP @ Wherego.io  Is this a new email address?    NO										
Residence Address (No P.O. Boxes) 2150 JEROME AVE.										
	City [	BRONX		State N	EW YORK <b>Zip</b>	10453				
	ness Type e check one)	Sol	e Proprietorship	Partne	ership	Corporat	ion			
			NEW VEHICLE	INFORMATIO	N					
		(	Fill out if requesting	a Vehicle Transfer	only)					
VEHICLE ID #					SEATING C	APACITY				
PLATE #			YEAR		MAKE					
ARE THE PLATES LISTED ABOVE CURRENTLY ON THE VEHICLE? YES O NO										
HAS THIS VEHICLE BEEN STRETCHED? YES NO NO IS THIS VEHICLE WHEELCHAIR ACCESSIBLE? YES NO NO										
IF YES, GIVE 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.										
CURRENT VEHICLE INFORMATION										
VEHICLE ID #	4T1BD1FK5	HU20654	11		YEAR	2017				
PLATE #	T719685C				MAKE	TOYOTA	A			

#### **BASE TRANSFER OR 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.

NEW BASE or COMMUTER VAN AUTHORITY	
	Services Corp.
BASE 11053105 #   D 0 0 0 7 0	Base Owner: Please review the rules and regulations that mandate affiliation and operation of this vehicle.
CURRENT BASE or COMMUTER VAN AUTHORITY	
BASE / AUTHORITY NAME ZWEI-NY, LLO	C
BASE LICENSE # B02866	Has this Base Owner been notified that this vehicle is being removed?  YES NO O
STREET HAIL PERMIT	FRANSFER OR AFFILIATION INFORMATION
In order to affiliate a vehicle with a Street Hail Livery Permit th must submit a signed affirmation form completed by the SHL PTYPE OF SHL PERMIT:  Wheelchair Accessible V Please Note: A Wheelchair Accessible SHL Permit MUST affilia	ehicle (WAV) Non-Wheelchair Accessible Vehicle (Non-WAV)
If this section is complete, you must submit an affirmation cor	
NEW PERMIT AFFILIATION STREET HAIL LIVERY PERMIT	T AFFILIATIONS ONLY
SHL PERMIT ENTITY NAME	
CIU DEDAME #	Permit Holder: Please review the rules and regulations that mandate affiliation and operation of this vehicle.
CURRENT PERMIT AFFILIATION STREET HAIL LIVERY AF	FILIATIONS ONLY
SHL PERMIT ENTITY NAME	
SHL PERMIT #	Has this Permit Owner been notified that this vehicle is being removed?  YES NO
1 Does the vehicle have less than 500 miles recorded  If you answered NO to question 1, an inspection fee of seventy-five (	
The mileage will be verified on the day of your inspection.  2 Is the vehicle higher than 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). Page 2 of 4

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

NOTE: This page does not	replace a filing rece	eipt for a Corporation or a m	ember l	oreakdo	wn for a LLC
Business Type (please check one):	Sole Proprieto	rship Partnership		0	Corporation
BOAZ BAGBAG				For Corpo	ration or Partnership,
IAILING ADDRESS:				•	check if you are:
CITY:	STATE:	ZIP:	O Pr	esident	Vice President
TELEPHONE #: (917)440	3563	# OF SHARES:	_	ecretary	Treasurer
SS #: —	DRIVER LICENSE #	:	Ŭ Sł	areholder	
AME:				For Corpor	ation or Partnership,
AILING ADDRESS:					check if you are:
ITY:	STATE:	ZIP:	O Pr	esident	Vice President
ELEPHONE #: ()	<u> </u>	# OF SHARES:	Se Se	cretary	Treasurer
s #: —	DRIVER LICENSE #:		<b>○</b> Sh	areholder	
AME:				For Corpor	ation or Partnership,
AILING ADDRESS:				=	check if you are:
TY:	STATE:	ZIP:	O Pro	esident	Vice President
ELEPHONE #: ()	<u> </u>	# OF SHARES:	O Se	cretary	Treasurer
s#: <del></del> <del></del>	DRIVER LICENSE #·		Sh	areholder	
σπ	DRIVER EICENSE #.				
AME:				For Corpore	ation or Partnership,
AILING ADDRESS:					check if you are:
ту:	STATE:	ZIP:	O Pre	esident	Vice President
ELEPHONE #: ()	<u> </u>	# OF SHARES:	O Sec	retary	Treasurer
5#: <b>-</b>	DRIVER LICENSE #:		Sha	areholder	
	For Election or (	Change of Officers use only			
a special meeting, stockholders of  minated and duly elected by unanimous vote the o	fficers listed above.	Company Name	2		
Secretary (Print)		Secretary (Signature)			Date
that there is an existing and current vehicle licen icle license since the last submission to the TLC. Co o hereby affirm, under penalty of law, that I have em(s) and/ or document(s) and that these document/ or fact(s). If the box above has been initialed the icle license since the last submission to the TLC. I are enial of an application or the suspension or revocate the raffirm and acknowledge that I have read all rure to do so may result in the issuance of a summore.	se issued by the TLC and topies of a principals DMV lexamined and reviewed that(s) and or statement(s) doesn! am also affirming that also acknowledge and undation of an existing license/jules applicable to my licen	icense are therefore not needed for thing in the submitted form(s) on the contain any untrue statement(s) in there have been no changes to the Buserstand that any false statement(s) subpermit.	e Business E s transaction or application or are they siness Entity mitted is p	entity struction.  on(s), incluing and structure unishable unfollow and	ding any supplemental y material information for the most current & ender the law and may recomply with these rules
Name: BOAZ BAGBAG		Signature:			
Title:		Date:			
		Date			

## **Affirmation Form**

(check	cone)		Owne Partn		<ul><li>O</li></ul>			fficer ockho	older								
LICENSE	ТҮРЕ	0	For-H	ire			0	Para	a Tran	sit			C		Commu	ıter Van	
In order to process an Signatures must be o	riginal and signed						l signa	tures.				-					
, BOAZ BA	GBAG						Aft	ord	able	e L	ea	SI	ng	Ma	anag	geme	ent Inc.
,	Name					,	En	tity Na	me (ei	ther a	pplic	ant	nam	e, ba	se, or Sl	HL permi	t holder)
with the vehicle iden I understand that:	tification number	: 4 7	Г 1	В	D I	L F	K	5 H	U	2	0	6	5	4	1		
"I hereby affirm, u application(s), inclu not contain any un applicable to my lie vehicle license sine	ding any supple strue statement( cense type. The	mental (s) nor a re has b	form(s are the been n	s) ar ey m o ch	nd/ or nissing nange	docug any s	ıment mate he Bu	(s) an rial in isiness	d tha forma Enti	t the ation ty st	ese o ano ruct	doc d/ d :ure	ume or fa	ent(s act(s the	and on a a a a a a a a a a a a a a a a a a	or state rding to curren	ement(s) do the rule to the existing the exi

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."

Applicant Name	<b>→</b>	BOAZ BAGBAG		
		Print Name	Signature	Date
Base Owner	<b>→</b>	Julio De Jesus Print Name	Signature	Date
Street Hail Livery Permit Owner (if Applicable)	<b>→</b>	Duint Norse	Cignotium	
		Print Name	Signature	Date

**RESET FORM**