

# 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.	YES 🗸		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.	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.	<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 Vehic	Livery Vehicle	1-8 passengers	\$100,000 per person \$300,000 per occurrence \$200,000 PIP*				
	&	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	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				
Pa	ratransit Vehicle	t Vehicle  Please refer to the New York State Department of Transportation (NYSDOT)  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.

					, , , , , ,	<u> </u>		
TYPE OF VEHICL	E:							
<b>⊙</b> FOI	R-HIRE VEHICLE	O PAR	RATRANSIT	0	COMMUTER	RVAN	TLC License n	ımber:
Street Hail Livery \ Vehicle Classificati		Vheelchair Accessibl	le Vehicle	Non Wheelchair	Accessible Vehic	cle		
Please Note: A Wh	eelchair Accessible SHL	. Permit MUST affil	iate a Wheelchair	Accessible Vehicle	2.		TLC H Record r	umber:
TRANSACTION T	YPE:	Transfer Plates	0	Transfer vehic	cle to another b	ase		
		Transfer Vehicle	Ø	Affiliate vehic	le to SHL Permi	t		
			APPLICANT IN	IFORMATION	J			
Name AF	FORDABLE L	EASING MA	NAGEMEN	T INC.				
D/B/A								
Mailing Address	2150 JER	OME AVE.						
City BRO	٧X	State	NEW YORK Zip 1	0453	EIN 💽 or	SS#		
Cell phone #	917 44	0 356	3	Other Telep	hone #			
Email Address (Required) Corp@wherego.io Is this a new email address?  VES NO								
Residence Address (No P.O. Boxes) 2150 JEROME AVE.								
City BRONX State NEW YORK Zip 10453								
	ess Type check one)	Sole Pr	oprietorship	Partne	ership	Corporati	ion	
NEW VEHICLE INFORMATION								
(Fill out if requesting a Vehicle Transfer only)								
VEHICLE ID #					SEATING CA	APACITY		
PLATE #			YEAR		MAKE			
ARE THE PLATES LISTED ABOVE CURRENTLY ON THE VEHICLE? YES NO								
HAS THIS VEHICL	E BEEN STRETCHED?	YES O	NO 🔘 I	S THIS VEHICLE	WHEELCHAIR	ACCESSIBLE?	YES O	NO O
IF YES, GIVE THE	NAME OF THE COAC	H 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	HU206541			YEAR	2017		
PLATE #	T719826C				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 AUTHORIT		
BASE LICENSE # B03289	Derg-Esser Corp  Base Owner: Please review the rules and regulations that mandate affiliation and operation of this vehicle.	
CURRENT BASE or COMMUTER VAN AUTH	DRITY	
BASE / AUTHORITY NAME ZWEI- BASE LICENSE # B02866	NY,LLC  Has this Base Owner been notified that this vehicle is being removed?  YES NO	
STREET HA	IL PERMIT TRANSFER OR AFFILIATION INFORMATION	
must submit a signed affirmation form completed TYPE OF SHL PERMIT: Wheelcha	ivery Permit the vehicle must have a underlying FHV, PARATRANSIT OR COMMUTER VAN LICENS ed by the SHL Permit Holder. See Affirmation Form on page 4.  r Accessible Vehicle (WAV)  init MUST affiliate a Wheelchair Accessible Vehicle.  affirmation complete by the Permit Holder.	E. You
NEW PERMIT AFFILIATION STREET HAIL I	VERY PERMIT AFFILIATIONS ONLY	
SHL PERMIT ENTITY NAME  SHL PERMIT #	Permit Holder: Please review the rules and regulations that mandate affiliation and operation of this vehicle.	i
CURRENT PERMIT AFFILIATION STREET H	AIL LIVERY AFFILIATIONS ONLY	
SHL PERMIT ENTITY NAME  SHL PERMIT #	Has this Permit Owner been notified that this vehicle is being removed?  YES NO	
<ul><li>1 Does the vehicle have less than 500 m</li><li>If you answered NO to question 1, an inspection feed the mileage will be verified on the day of your inspection.</li><li>2 Is the vehicle higher than 7 feet?</li></ul>	of seventy-five (\$75) is required.	
3 Does this vehicle weigh over 8,500lbs	YES NO O	

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			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 #	:	<b>□</b> Sh	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 #:		☐ 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), inclumissing 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 on	e)	Owner Partner	Office Stock	er holder			
LICENSE TYPE	<b>O</b>	For-Hire	P.	ara Transit		Co	ommuter Van
In order to process an appl Signatures must be original	_			-	entity.		
<b>BOAZ BAGB</b>	BAG		Affor	dable l	_easin	g Mai	nagement Inc.
,	Name		Entity I	Name (either	applicant n	ame, base	e, or SHL permit holder)
with the vehicle identificat I understand that:	ion number: $4\ 1$	Г1ВD1	F K 5	H U 2	0 6	5 4 1	1
"I hereby affirm, under application(s), including not contain any untrue applicable to my license vehicle license since th statement(s) submitted revocation of an existing I further affirm and acknown to follow and comply wimposition of points, fine	any supplemental statement(s) nor a type. There has be last submission is punishable und license/permit. owledge that I have ith these rules. Fa	form(s) and/ or of are they missing to been no changes to the TLC, if a der the law and e read all rules appliture to do so many and to the so many and the so many and the so many are the sound are the so	document(s) a any material to the Busine applicable. I may result in policable to my ay result in the	and that the information information in the informa	nese docu on and/ on structure owledge a of an ap	ment(s) are fact(s) after the name of the	and or statement(s) do according to the rules most current & existing erstand that any false or the suspension or distant I am are required
Applicant Name	BOAZ BA	AGBAG					
	Print N	Name		Signature			Date
Base Owner 🗪	Maximo F			Signature		. <u></u> -	
Street Hail Livery Permit Owner (if Applicable)				Jigiiatuie			Date
	Print N	Name		Signature			Date

**RESET FORM**